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URBAN DISTRICT
OF COLNE VALLEY

ANNUAL REPORT
OF THE
Medical Officer of Health
For the Year 1953

BY
ERIC WARD
M.R.C.S., L.R.C.P., D.P.H.

SLAITHWAITE:
A. T. GREEN & CO., CARR LANE,
1954

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Colne Valley Urban District

LIST OF COUNCILLORS

for the year 1953/54.

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*J. E. SYKES, Esq., J.P.

Vice-Chairman:

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*G. R. GARSIDE, Esq.

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** Chairman of the Public Health Committee.

*Member of the Public Health Committee

PUBLIC HEALTH OFFICERS OF THE COUNCIL

Medical Officer of Health:

ERIC WARD, M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health:

H. C. MILLIGAN, M.B., Ch.B., D.P.H.

Chief Sanitary Inspector and Cleansing Superintendent:

A. SCHOFIELD, C.R.S.I., M.S.I.A.

Assistant Sanitary Inspectors:

D. SUTCLIFFE, M.S.I.A., A.R.S.I.

C. B. MARTIN, M.S.I.A.

H. HANSON, M.S.I.A.

Rodent Operator:

G. W. DOBSON

Divisional Health Office,
Woodville,
Scar Lane,
Golcar,
Near Huddersfield
December, 1954

To the Chairman and Members of the
Colne Valley Urban District Council.

Mr. Chairman, Lady and Gentlemen,

I have the honour to present to you my 6th Annual Report on the Health of the Colne Valley Urban District and the work of the Public Health Department during 1953. The report is the 16th in the series since the formation of the Urban District in 1938.

I am again indebted to your Chief Sanitary Inspector for the compilation of Sections III, IV and V, which deal with the Sanitary Circumstances of the Area, Housing and the Inspection and Supervision of Food. These Sections form the Chief Sanitary Inspector's Report for the year and contain much very important information.

As in previous years particulars are given in Section VII of the Services provided under Part 3 of the National Health Service Act, 1946 by the West Riding County Council as the Local Health Authority.

The vital statistics for the year do not call for any particular comment.

There has been no unusual incidence of infectious or other diseases except an increase in the number of cases of Scarlet Fever and the occurrence of a single case of Smallpox. Again no cases of confirmed Diphtheria have occurred in the Area. This satisfactory position can not be expected to continue unless greater use is made of the facilities for immunisation. Far too many young children are not being immunised during their first year of life. Parents must be warned that a re-occurrence of the disease is possible unless a greater number of children are given protection.

Greater use has been made during the year of the powers existing under the Housing Acts to deal with unfit houses, but the lack of alternative accommodation has prevented any large scale demolition programme being put into effect.

Approval was given during the year by the Ministry of Health to the Council's proposal to lay a trunk sewer from Marsden to the Huddersfield County Borough Boundary. It is hoped that the work of laying this sewer will be put in hand as soon as possible in order that the use of the obsolete Sewage Disposal Works in the District may be discontinued.

The Chief Sanitary Inspector and his staff have continued their campaign for improved standards of hygiene in food preparing premises and shops with very satisfactory results.

In conclusion I again wish to express my thanks to the Chairman and all Members of the Council for their continued interest and support and to record my appreciation for the help and co-operation received from the Clerk and other Chief Officers. In particular my thanks are due to Mr. A. Schofield, your Chief Sanitary Inspector and his Assistants for the invaluable help and loyal service at all times freely given.

I am,

Your obedient servant,

ERIC WARD,

Medical Officer of Health

SUMMARY OF STATISTICS

1. General Statistics

Area in Acres	...	...	...	...	16,052
Enumerated Population (Census, 1951)	...	...	...	...	22,184
Registrar-General's Estimate of Population (middle of 1952)	...	...	...	...	21,880
Registrar-General's Estimate of Population (middle of 1953)	...	...	...	...	21,670
Number of Inhabited Houses (March, 1954)	...	...	...	...	8,051
Rateable Value (31st March, 1954)	...	...	...	...	£136,633
Sum represented by a Penny Rate (March, 1954)	...	...	...	...	£537

2. Extracts from Vital Statistics.

Live Births:				Male	Female	Total
Legitimate	...	...	...	155	132	287
Illegitimate	...	...	...	7	4	11
Total	...	...	...	162	136	298

Crude Birth Rate per 1,000 of estimated resident population ...13.75

Adjusted Birth Rate per 1,000 of estimated resident population ...14.16

Still Births:

				Male	Female	Total
Legitimate	...	...	...	6	1	7
Illegitimate	...	...	...	—	—	—
Total	...	...	...	6	1	7

Rate per 1,000 of total (live and still) births: 22.95

Deaths:

Males 141, Females 136	...	...	...	...	277
Crude Death Rate per 1,000 of estimated resident population	...	...	...	...	12.78
Adjusted Death Rate per 1,000 of estimated resident population	...	...	...	...	11.63
Deaths from Puerperal Causes	...	...	...	...	Nil

Number of Deaths of Infants under 1 year of age:

				Male	Female	Total
Legitimate	...	...	...	6	—	6
Illegitimate	...	...	...	1	—	1
Total	...	...	...	7	—	7

Death Rate of Infants under 1 year of age:

All Infants per 1,000 live births	...	...	...	...	23.49
Legitimate Infants per 1,000 legitimate live births	...	...	...	...	20.91
Illegitimate Infants per 1,000 illegitimate live births	...	...	...	...	90.91

Death Rate per 1,000 population from:

Pulmonary Tuberculosis	...	...	...	...	0.05
All forms of Tuberculosis	...	...	...	...	0.10
Respiratory Diseases (excluding Pulmonary Tuberculosis)	...	...	...	...	1.15
Cancer	...	...	...	...	1.98
Infective and Parasitic Diseases (excluding Tuberculosis but including Syphilis and other V.D.)	...	...	...	...	0.18
Deaths from Measles (all ages)	...	...	...	...	Nil
Deaths from Diarrhoea (children under 2 years of age)	...	...	...	...	Nil
Death rate from Diarrhoea and Enteritis of children under 2 years of age per 1,000 births	...	...	...	...	Nil

Section 1.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT

The district is varied in character. Industrial communities occupy the Valley whilst small hamlets and scattered farms are found on the uplands which lie on each side and at the head of the Valley.

The principal industry of the District is the manufacture of textiles. Quarrying and agriculture also provide employment for a fair number of persons.

VITAL STATISTICS

Population.

The Registrar-General's estimate of the population at mid-1953 was 21,670 as compared with 21,880 at mid-1952. This decrease allowing for the natural increase of births over deaths of 21, shows that some 231 of the population have moved to other areas.

Comparability Factors

Area comparability factors in respect of Births and Deaths have been supplied by the Registrar-General, and for your district these are 1.03 and 0.91 respectively. These are factors by which the crude birth and death rates should be multiplied in order to make them truly comparable with the rates for other areas.

The need for such adjustment is occasioned by the differences in the constitution of area populations as regards the proportions of their sex and age group components. The fact that your district has a comparability factor of 0.91 for deaths shows that the population contains a higher proportion of elderly people than the average area, which would in all probability result in a high crude death rate, despite the general health conditions of the population being good. The factor of 1.03 for births shows that the proportion of women in the maternal age groups is less than in the average area.

Births

After adjustment for inward and outward transferable births, a net total of 298 live births (162 male, 136 female) was registered in the District during the year, an increase of 10 compared with the previous year.

The ADJUSTED BIRTH RATE is 14.16 per 1,000 of the population as compared with 13.56 for the previous year, 15.5 for England and Wales, 16.0 for the West Riding Administrative County, and 15.5 for the Aggregate West Riding Urban Districts.

The Illegitimate Live Births numbered 11, or 3.69% of the total live births, a decrease of 2 compared with 1952.

Stillbirths

After adjustment for transfers, 7 stillbirths were registered during the year as compared with 5 for the previous year. This figure gives a rate of 22.95 per 1,000 live and stillbirths and 0.32 per 1,000 of the population as compared with 17.06 and 0.23 respectively for 1952.

Deaths

After correction for inward and outward transferable deaths, the net total deaths registered in and assigned to the District was 277 (141 male, 136 female), a decrease of 11 compared with the total for the year 1952.

The ADJUSTED DEATH RATE is 11.63 per 1,000 of the population as compared with 11.98 for the previous year.

The following were the principal causes of death in order of frequency:—

(i)	Diseases of the Heart and Circulatory System ...	116
(ii)	Malignant Neoplasms	43
(iii)	Intra-Cranial Vascular Lesions	39
(iv)	Diseases of the Respiratory System	25

These four causes accounted for 80.51% of the total deaths. Particulars of the various causes of death and of age and sex distribution are given in the following table:—

Causes of Death	Sex	All Ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
All Causes	M	141	7	...	1	...	3	...	9	14	34	39	34
	F	136	...	...	1	1	...	1	2	9	23	44	55
1 Tuberculosis, respira- tory	M	1	...	...	...	...	...	...	...	...	1	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
2 Tuberculosis, other ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	1	...	...	...	...	...	...	...
3 Syphilitic disease ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
4 Diphtheria	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
5 Whooping Cough ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
6 Meningococcal infec- tions	M	1	1	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
7 Acute poliomyelitis ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
8 Measles	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
9 Other infective and parasitic diseases ...	M	3	...	...	...	...	2	...	...	...	...	...	1
	F	...	...	...	...	...	...	...	...	...	...	...	...
10 Malignant neoplasm, stomach	M	4	...	...	...	...	...	...	...	1	1	...	2
	F	1	...	...	...	...	...	...	...	...	1	...	...
11 Malignant neoplasm, lung, bronchus ...	M	2	...	...	...	...	...	...	...	1	...	1	...
	F	1	...	...	...	...	...	...	...	...	...	...	1
12 Malignant neoplasm, breast	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	2	...	...	...	...	...	...	1	...	1	...	...
13 Malignant neoplasm, uterus	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	...	...	...	...	...	1
14 Other malignant and lymphatic neoplasms ...	M	18	...	...	...	...	...	...	...	4	3	6	5
	F	13	...	...	...	...	...	...	...	3	3	5	2
15 Leukaemia, aleukaemia	M	1	...	...	...	...	...	...	...	...	...	1	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
16 Diabetes	M	1	...	...	...	...	...	...	1	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
17 Vascular lesions of ner- vous system	M	21	...	...	...	...	...	...	1	1	8	4	7
	F	18	...	...	...	...	...	...	...	2	2	9	5
18 Coronary disease, angina	M	23	...	...	...	...	...	...	4	3	6	7	3
	F	12	...	...	...	...	...	...	...	...	1	8	3
19 Hypertension with heart disease	M	1	...	...	...	...	...	...	...	...	...	1	...
	F	7	...	...	...	...	...	...	...	...	3	2	2
20 Other heart disease ...	M	22	...	...	...	...	1	...	1	2	5	6	7
	F	41	...	...	...	...	...	...	1	1	7	7	25
21 Other circulatory dis- ease	M	3	...	...	...	...	...	...	...	...	...	2	1
	F	7	...	...	...	...	...	1	...	1	1	1	3
22 Influenza	M	1	...	...	...	...	...	...	...	...	...	1	...
	F	1	...	...	...	...	...	...	...	...	1	...	...
23 Pneumonia	M	5	3	...	1	...	...	...	...	...	...	...	1
	F	4	...	...	...	...	...	...	...	...	...	3	1
24 Bronchitis	M	8	...	...	...	...	...	...	...	...	3	3	2
	F	3	...	...	...	...	...	...	...	...	...	1	2
25 Other diseases of respir- atory system	M	2	...	...	...	...	...	...	...	...	1	...	1
	F	1	...	...	...	...	...	...	...	...	...	1	...
26 Ulcer of stomach and duodenum	M	3	...	...	...	...	...	...	...	...	1	2	...
	F	1	...	...	...	...	...	...	...	...	...	1	...
27 Gastritis, enteritis, and diarrhoea	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	...	...	1	...	...	...
28 Nephritis and nephrosis	M	1	...	...	...	...	...	...	...	...	1	...	...
	F	3	...	...	...	...	...	...	...	1	...	1	1
29 Hyperplasia of prostate	M	4	...	...	...	...	...	...	...	...	1	2	1
	F	...	...	...	...	...	...	...	...	...	...	...	...
30 Pregnancy, childbirth, abortion	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
31 Congenital malforma- tions	M	2	1	...	...	...	...	...	...	1	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
32 Other defined and ill- defined diseases ...	M	8	1	...	...	...	...	...	1	1	2	1	2
	F	13	...	...	1	...	...	...	...	...	2	3	7
33 Motor vehicle accidents	M	1	...	...	...	...	...	...	1	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
34 All other accidents ...	M	3	1	...	...	...	...	...	...	...	...	2	...
	F	2	...	...	...	...	...	...	...	...	...	1	...
35 Suicide	M	2	...	...	...	...	...	...	...	...	...	1	1
	F	3	...	...	...	...	...	...	...	...	1	1	1
36 Homicide and operations of war	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...

Maternal Deaths and Mortality

There were no deaths from Puerperal Sepsis or other maternal causes.

Infant Mortality.

After correction for transferable deaths, there were 7 deaths (all male) of infants under 1 year of age, a decrease of 3 compared with the previous year. Of these deaths 3 of the infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE is 23.49 per 1,000 live births as compared with 34.72 for the previous year.

The death rate amongst legitimate infants per 1,000 legitimate live births is 20.91 as compared with 36.36 for the year 1952.

One illegitimate child died under one year of age giving a death rate amongst illegitimate infants per 1,000 illegitimate live births of 90.91.

Comparative Statistics

	Colne Valley Urban District	Aggregate West Riding Urban Districts	West Riding Admin. County	England and Wales (provisional figures)
BIRTH RATE Per 1,000 estimated population ... (crude) do. (adjusted)	13.75 14.16	15.4 15.5	15.7 16.0	15.5 —
DEATH RATES All per 1,000 estimated population				
All Causes (Crude) ...	12.78	12.5	11.6	11.4
All Causes (Adjusted) ...	11.63	12.6	12.1	—
Infective and Parasitic Diseases (excl. T.B.) ...	0.18	0.09	0.08	*
Tuberculosis of Respiratory System	0.05	0.17	0.16	0.18
Other forms of Tuberculosis Respiratory Diseases (ex- cluding Tuberculosis of respiratory system) ...	0.05	0.02	0.02	0.02
Cancer	1.15	1.39	1.30	*
Heart and Circulatory Diseases	1.98	1.99	1.88	1.99
	5.35	4.63	4.26	*
INFANT MORTALITY ...	23.49	27.6	29.3	26.8
DIARRHOEA Deaths of infants under 2 years of age per 1,000 live births	Nil	*	*	*
MATERNAL MORTALITY Puerperal Sepsis	Nil	*	*	*
Other Causes	Nil	*	*	*
Total	Nil	0.38	0.51	0.76

* Figures not available.

Section II.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Staff

The Medical Officer of Health is a part-time Officer of the Council but is engaged whole-time on public health work, being also Medical Officer of Health for the Urban Districts of Denby Dale, Holmfirth, Kirkburton, Meltham and Saddleworth, and Divisional Medical Officer for Division 20 of the West Riding, which is composed of the 6 Urban Districts of which he is Medical Officer of Health.

In addition to the Medical Officer of Health the staff consists of a Chief Sanitary Inspector who is also the Cleansing Superintendent, 3 District Sanitary Inspectors, and a clerical staff of two.

Laboratory Facilities

All the bacteriological laboratory work required to be undertaken by the Health Department and by General Practitioners is carried out at the Wakefield Laboratory of the Public Health Laboratory Service, whilst samples of water for chemical examination are sent to the laboratories of Messrs. Richardson and Jaffe, Public Analysts, Bradford.

Ambulance Facilities

(a) Cases of Infectious Diseases.

The ambulance of the Isolation Hospital to which the patient is admitted is used for the removal of the patient.

(b) Cases of Sickness and Accident.

An Ambulance Service is operated by the West Riding County Council, the Colne Valley Urban District being in Ambulance Area No. 16. The depot for the area is situated at Banney Royd, Halifax Road, Huddersfield.

Professional Nursing in the Home

General: Home Nursing is undertaken by 3 Home Nurses employed by the West Riding County Council and resident at Golcar, Marsden and Linthwaite.

Midwifery: Until September 2 whole-time midwives were employed by the West Riding County Council who were stationed at Golcar and Slaithwaite. The midwife at Golcar then resigned her appointment and her duties were taken over by a relief nurse/midwife. A relief nurse/midwife is also resident at Marsden.

Further details of the nursing services provided in the area will be found in Section VII of this report.

Treatment Centres, Clinics, and Hospitals

Infant Welfare Centres

Held weekly on Tuesday afternoon at Linthwaite, Wednesday afternoon at Golcar and Slaithwaite, and on Thursday afternoon at Marsden.

Ante-Natal Clinics

There are no separate Ante-Natal Clinics in the District but expectant mothers may be seen prior to the Infant Welfare sessions on the 1st Wednesday afternoon in the month at Slaithwaite and on the 4th Wednesday afternoon in the month at Golcar.

School Clinics

No special School Clinics are held in the District but school-children are seen at all Infant Welfare Clinic Sessions.

All these clinics are held in the following premises:—

Linthwaite: Grove House, Linthwaite.

Golcar: Woodville, Scar Lane, Golcar

Marsden: Conservative Club, Marsden

Slaithwaite: Civic Hall, New Street, Slaithwaite.

Chest Clinic.

Held daily at 1, Peel Street, Huddersfield, but a prior appointment is necessary.

Venereal Diseases Clinics

Held at York Place, New North Road, Huddersfield; Clayton Hospital, Wakefield; and the General Infirmary, Dewsbury.

Hospitals

(a) Infectious Diseases:

Under the National Health Service Act, Colne Valley is placed in the Leeds Regional Hospital Area, and cases of infectious diseases, other than smallpox, are admitted to the Mill Hill Isolation Hospital, Huddersfield.

Accommodation for cases of Smallpox is provided by the Regional Board at the Oakwell Smallpox Hospital, Birstall.

(b) General Hospitals:

Huddersfield Royal Infirmary.

Staincliffe General Hospital, Dewsbury.

Deanhouse Hospital, Thongsbridge, Holmfirth.

(c) Maternity:

Arrangements are made for the admission of patients to the Princess Royal Maternity Home, Huddersfield, and various General Hospitals.

Section III

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

The Huddersfield Corporation are the Statutory Water Undertakers for the Colne Valley area with the exception of Scammonden, a widely scattered hamlet of approximately 108 houses to the north of the District. The Scammonden area is served by a number of private springs and wells, in 74 instances the water being piped into the houses.

The water mains of the statutory body by no means cover the whole area, and water is supplied from many other sources. During the year 144 houses on one of the Council's housing estates have been transferred to the mains supply.

The Dartmouth Estate continues to supply water in the Slaithwaite area.

There are in the area innumerable small private supplies serving groups of from 20 houses down to single dwellings, and although a number of these supplies are known to be unsuitable for domestic purposes, they are the only water supplies available, and a mains supply is not possible without some considerable extensions of the Statutory Undertakers' mains. In the meantime, improvements to the existing supplies are still being carried out where possible.

A total of 27 samples of water were taken during the year for bacteriological examination, 10 being reported as satisfactory and 17 as unsatisfactory. Following investigations, the possibility of extending the water undertakers mains is under consideration for the houses which were the source of the majority of the unsatisfactory samples, and improvements at the springs is being carried out in other instances.

Two samples from the Council's private water supply were examined for plumbo-solvency and found to be satisfactory. This supply has now been discontinued, the houses, as stated above, being transferred to the Corporation mains.

Drainage and Sewerage

Large parts of the District are still not sewered, and use of the water carriage system in these parts is very limited. The Official Enquiry into the scheme for the provision of a new trunk sewer was held during the year and the Ministry's instructions were being awaited at the close of the year. When this work is carried out and the necessary branch sewers laid it will be possible to extend the water carriage system to other parts of the District. During the year 18 inspections of sewers were made and 1 nuisance remedied.

Closet Accommodation.

The abolition of privies and pail closets, where possible, is still proceeding and during the year 32 privies and 15 pail closets were abolished and replaced by 68 water closets.

The following is a summary of the sanitary accommodation at the end of the year:—

No. of flushed water closets	...	...	...	...	6,189
No. of waste water closets...	...	...	...	...	55
No. of privies	...	...	...	...	749
No. of tub or pail closets	...	...	...	...	323
No. of standard dustbins	...	...	...	...	7,064
No. of ashpits	...	...	...	...	311

Public Cleansing

The alternate weekly collection of refuse and salvage has been continued during the year together with the weekly emptying of tub and pail closets. The efficiency of the department is very much impaired by the difficulties experienced in obtaining labour for this work, but some re-organisation and the Incentive Bonus Scheme have made it possible to maintain a satisfactory bin service and the monthly service to privies; salvage work has, however, suffered to a fairly large extent. Industry with its better wages, the dirt and unpleasantness of the work and the rugged nature of the district, all add to the difficulty of obtaining labour for the cleansing service.

The following is a summary of the work carried out during the year:—

Average No. of Dustbins emptied per week	...	...	3436
Average No. of privies cleansed per week	...	...	170
Average No. of ashpits emptied per week	...	...	119
Average No. of tub or pail closets emptied per week	...	...	291

Refuse Disposal.

Controlled tipping still accounts for 98% of the total dry refuse (including privy contents) disposed of, whilst the remaining 2%, mainly trade refuse of a putrescible character, is burned at the Destructor Plant.

Tub and pail contents, collected by nightsoil tank, are discharged into the detritus chambers at the Slaithwaite and Golcar Sewage works.

Here again, labour problems and the difficulty in obtaining suitable covering material, greatly affect the efficiency of the work.

The following figures give the cost of the refuse collection and disposal services for the year ending 31st March, 1954, together with the income for the same period:—

		Expenditure			Income			Nett Expenditure		
		£	s.	d.	£	s.	d.	£	s.	d.
Refuse Collection	...	8181	15	9	569	15	4	7612	0	5
Salvage Collection	...	3132	1	7	2256	15	11	875	5	8
Refuse Disposal	...	2388	19	6	92	15	4	2296	4	2
		<hr/>			<hr/>			<hr/>		
		£13702	16	10	£2919	6	7	£10783	10	3
		<hr/>			<hr/>			<hr/>		

Included in the refuse disposal expenditure, two items £565 for purchase of land and £135 for the making up of the road to Marsden Tip are unusual.

Shops Act.

Shop sanitation continues to receive attention and during the year 111 visits were made to shops, 10 defects were recorded and 7 remedied.

Smoke Abatement.

During the year 69 half-hourly smoke observations were recorded and in one instance only were the Smoke Abatement Byelaws contravened, the firm being cautioned. The new plant referred to in last year's report was completed and brought into commission during the year, and other improvements to boiler plant were carried out.

The Atmospheric Pollution gauges have been maintained at Marsden and Slaithwaite, together with a smoke filter gauge at the Town Hall, Slaithwaite. The average monthly deposit of solid matter per square mile is as follows:

Marsden ... 14.26 tons.	Slaithwaite ... 13.47 tons.
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The long periods of this year when the wind has been in the east have had a marked effect on the Marsden gauge, and further confirms the opinion that drift smoke from the Lancashire towns greatly affects the Colne Valley area.

Regulated Buildings and Offensive Trades

There are two offensive trades carried on in the district, one Soap Boiler, and one Gut Scraper and Fat Melter, and 12 visits have been made to these premises, which on each occasion were found to be satisfactory.

Eradication of Bed Bugs.

No instances of infestation with bed bugs have been reported or found during the year.

Schools

There are in the District 20 schools, 12 being County Schools including 1 Secondary Modern School, and 8 being Voluntary Schools. The buildings generally are kept in a reasonable state of repair, but the condition of the sanitary accommodation and the provision of wash-basins still remain unsatisfactory features in some of the schools.

Sanitary Inspection of the Area

Record of Inspections and Results.

Inspections made in respect to	No. of Inspections	Nuisances or defects found	No. of re- Inspections	Nuisances or defects remedied
Public Health Act:—				
Housing	155	136	406	123
Other Nuisances ...	192	95	403	77
Water Supply	113	25	231	28
Overcrowding	19	3	4	2
Sanitary Accommodation:—				
W.C.'s	145	17	225	23
Privies	52	16	508	42
Tubs and Pails	19	7	446	17
Ashes Accommoda- tion	118	45	91	52
Drains:—				
Inspected	422	43	164	40
Tested	356	13	16	15
New Drainage	154	—	4	—

Inspections made in respect to	No. of Inspections	Nuisances or defects found	No. of re- Inspections	Nuisances or defects remedied
Accumulations ...	2	1	6	3
Swine, Fowl, and Other Animals ...	3	—	1	1
Shop Premises — Shops Act ...	103	10	8	7
Rodent Control (Visits by Inspectors) ...	19	—	2	—

Other Visits:—

Respecting Infectious Diseases ...	...	...	306
Respecting Disinfections ...	...	...	72
Respecting Schools, Public Buildings, etc. ...	...	...	15
Respecting Sewers, Cesspools, etc. ...	...	...	35
Miscellaneous Visits ...	...	...	429
Interviews — Owners, Contractors, etc. ...	...	...	1222
Informal Notices Served ...	111	Complied with ...	124
Statutory Notices Served ...	1	Complied with ...	—

Factories Act 1937.

The following is an extract from the report to the Director of Statistics of the Ministry of Labour on Form 573 (Revised).

1. Inspections for Purposes of Provisions as to Health.

Premises	No. on Register	Insp'tions	Written Notices	Owners Prose'ted
(1) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities.	20	6	—	—
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority	117	133	6	1
(3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).	4	12	—	—
Total	171	151	6	1

2. Cases in which Defects were Found.

Particulars	Found	Remedied	Referred by H.M. Inspector	Prose- cutions
Want of cleanliness:	6	5	1	—
Ineffective drainage of floors ...	—	1	—	—
Sanitary conveniences				
(a) Insufficient ...	—	1	—	—
(b) Unsuitable or de- fective ...	—	4	1	—
(c) Not separate for sexes	—	—	—	1
Other offences against the Act (not including of- fences relating to Out- work ...)	—	—	—	—
Total	6	11	2	1

3. Outworkers.

There are in the District 47 outworkers, employed in burling and mending by various textile firms, 23 in the making of wearing apparel, and one in the making of curtains and furniture hangings.

The Prevention of Damage by Pests Act, 1949.

A part-time operator is employed by the Council on this work and during the year 71 complaints of rodent infestation were received, 895 visits were made, and 96 premises treated. The estimated number of rats destroyed was 794 and the number of mice destroyed was 430.

A test bait of the sewers was carried out, 61 manholes being baited of which 14 showed evidence of infestation.

Two sewer maintainance treatments were carried out during the year, 326 man-holes were pre-baited, there were 83 poison takes, and the estimated number of rats destroyed was 207.

Statistical Return

	Type of Property				Total
	Local Authority Owned	Dwelling Houses	Agricultural	All other (including Business & Industrial)	
1. Total number of properties in Local Authority's District	35	7797	120	1189	9141
2. Number of properties inspected by the Local Authority during 1953 as a result of:					
(a) Notification	(a) 26	48	—	22	96
(b) Otherwise	(b) —	122	57	584	763
3. Number of properties (under 2) found to be infested by rats	Major 13	—	—	2	15
	Minor 13	24	—	10	47
4. Number of properties (under 2) found to be seriously infested with mice ...	—	12	—	10	22
5. Number of infested properties (under 3 and 4) treated by the Local Authority	26	48	—	22	96

HOUSING

Although the housing position shows some improvements when considered from the angle of the applicants on the Council's waiting lists, the rate of building is still not keeping pace with the demand.

Whilst a great deal of work has been done in carrying out repairs to privately owned houses, these repairs have, in the main, been more or less in the nature of abatement of nuisances and urgent defects, and the problem of re-conditioning these houses still remains. The low rentals of a great many of these houses do not encourage owners to spend fairly large sums of money on repairs, and the problem of owners asking for Demolition or Closure and pleading unreasonable cost still remains. Action under Sections 11 and 12 of the Housing Act has been taken to prevent the re-letting of totally unfit houses from which the Council have re-housed tenants, and 3 Demolition Orders were made and 7 houses closed on Undertaking during the year.

Undertakings to make fit two houses were accepted after Official Representations had been made to the Council as to their unfit condition.

Particulars required by the Ministry of Health are set out below:—

Total number of inhabited houses in the Urban District	...	8,051
Number of new houses erected during the year:—		
By private enterprise	...	10
By Local Authority	...	50

The principal work done under the Housing Act, 1936, can be summarised as follows:—

Inspections:—		Primary	Re-visited
Part 1. Clearance Areas	...	—	4
" " Other Visits	...	10	—
Part 2. Section 9 — Reconditioning	...	—	—
Sections 11/12—Demolition or Closure	...	49	51

Housing Statistics

1. Inspection of Dwelling-houses during the year:—

(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	...	888
	(b)	Number of inspections made for the purpose	...	3395
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	...	49
	(b)	Number of inspections made for the purpose	...	100
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	12
(4)		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	...	405

2. Remedy of defects during the year without Service of Formal Notices:—

(a) Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	Nil
(b) Number of defective dwelling houses (excluding those in (a) above) in which defects were remedied in consequence of informal action. ...	403

3. Action under Statutory Powers during the year:—

(1) Housing Act, 1936, Sections 9 and 10	Nil
(2) Public Health Acts—	
Number of dwelling-houses in respect of which Notices were served requiring defects to be remedied	Nil
Number of dwelling-houses in which defects were remedied after service of formal notices	Nil

Proceedings under Sections 11 and 13 of the Housing Act 1936:—

(1) Number of representations, etc., made in respect of dwelling-houses unfit for human habitation ...	10
(2) Number of dwelling-houses in respect of which Demolition Orders were made	3
(3) Number of dwelling-houses demolished in pursuance of Demolition Orders	5
(4) Number of dwelling-houses closed on undertakings (not demolished)	7
(5) Number of dwelling-houses made fit on undertakings	2

Proceedings under Section 12 of the Housing Act, 1936:—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil

4. Housing Act, 1936 — Part IV. Overcrowding.

In the absence of a census it is impossible to assess the present position with regard to overcrowding with any degree of accuracy. No general action is possible, but special cases brought to notice are dealt with as opportunity arises.

During the year 3 new cases of overcrowding were recorded, and 2 cases were abated.

From observations and information obtained during the year it would appear that the percentage of Legal Overcrowding in Colne Valley is fairly low, but that the application of the bedroom standard to the same houses would show marked overcrowding in a large number of cases. Special visits in connection with 23 cases of alleged overcrowding revealed only 3 cases of legal overcrowding.

Section V.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply

The tendency for more producers of milk to send their milk into large dairy plants for heat treatment has resulted in an increase in the sale of pasteurised and sterilised milk in the area, and a consequent reduction in the amount of non-designated milk from local producer/retailers being supplied. A certain amount of Tuberculin Tested milk is also sold and there appears to be a tendency for this to increase. The number of retail purveyors of milk (exclusive of producer/retailers) is 20, including 5 dairies, 9 shops selling bottled milk only and 6 distributors with premises outside the district.

During the year 10 samples of milk were submitted to the Public Health Laboratory Service for examination for *Brucella Abortus*, 5 being negative and 5 positive. The positive samples were reported to the Ministry of Agriculture, Veterinary Service, for action.,

A total of 8 samples of milk were submitted to the Public Health Laboratory Service for examination for tubercle bacilli, with negative results.

Milk (Special Designation) Regulations, 1939-49.

The following licences were granted by the Council during the year:—

1. Dealers' licences to retail Tuberculin Tested milk	...	...	5
2. Dealers' licences to retail Pasteurised milk	...	...	8
3. Supplementary licences to retail Tuberculin Tested milk	...		2
4. Supplementary licences to retail Pasteurised milk	...	...	2
5. Dealers' licences to retail Sterilised milk...	...	...	9
6. Dealers' licences to retail Tuberculin Tested/Pasteurised milk			1

Ice Cream

There are no large manufacturers of ice cream in the district, but three small retailers manufacture a complete cold mix. In addition to these, 60 premises retail pre-packed ice cream supplied from outside the district. Twenty-two visits have been made to ice cream premises during the year and advice given with regard to personal hygiene and clean food production and handling methods. During the year 6 samples of ice cream have been taken and submitted for examination. Of these, 4 were classified as Grade 1, and 2 as Grade 2. The provisional grades of ice cream are as follows:—

Provisional Grade	Time taken to Decolourise Methylene Blue
1	4½ hours or more.
2	2½ to 4 hours.
3	½ to 2 hours.
4	0.

Numerous factors and experimental errors of laboratory tests make it necessary for judgement to be based on a series of samples. Over a period, 50 per cent. should fall into Grade 1; 80 per cent. into Grades 1 and 2; not more than 20 per cent. into Grade 3; and none into Grade 4.

Food Preparing Premises.

A total of 43 premises have been registered in accordance with Section 14 of the Food and Drugs Act, 1938, for the preparation or manufacture of sausages or potted, pickled, or preserved food intended for sale, and during the year 118 visits have been made to these premises. The standard of the premises is gradually being raised with the excellent co-operation of the food traders and the department. Attention during the year has also been directed to the handling of food in "general food premises" and 171 visits have been made to these premises, advice given, and facilities for the washing of hands (including running hot and cold water) obtained.

Meat.

There is one public abattoir, one licenced, and ten registered slaughterhouses in the district, the use of which has been suspended since the outbreak of war, with the exception of occasional use for slaughtering under licence.

The number of men licenced to slaughter animals in accordance with the Slaughter of Animals Act, 1933, is 32.

Carcases Inspected and Condemned

	Cattle ex'd'g Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known),	—	—	—	—	—
Number inspected	—	—	—	—	54
All diseases except Tuberculosis					
Whole carcasses condemned	—	—	—	—	—
Carcases of which some part or organ was condemned	—	—	—	—	—
Percentage of number inspect- ed affected with disease other than Tuberculosis	—	—	—	—	—
Tuberculosis only					
Whole carcasses condemned	—	—	—	—	—
Carcases of which some part or organ was condemned	—	—	—	—	5
Percentage of number inspect- ed affected with Tuberculosis	—	—	—	—	9%
Total weight condemned	—	—	—	—	79 lbs.

In order to carry out this work 6 visits were made to the Public Abattoir, and 4 to private slaughterhouses, a total of 90 meat and food inspections being made in all.

Bread and Confectionery.

There are in the District 20 bakehouses, none of them underground, of which 32 inspections were made during 1953.

Surrender of Other Foods

	lbs.
Tinned Fruit	347
„ Vegetables	1
„ Milk	2
„ Soup	1
„ Meat	152 $\frac{1}{4}$
„ Fish	3
Bottled Rabbit	6
Desiccated Coconut	3
Bacon	91
Frozen Eggs	66
Dried Milk	56
Lemon Curd	6 $\frac{1}{2}$
Margarine	11
Fat and Fat Extender	53 $\frac{1}{2}$
Total ...	799 $\frac{1}{4}$

Food and Drugs Act, 1938

The West Riding County Council is the authority responsible for the Food Adulteration Section of the Act. The following particulars of samples taken during the year have been supplied by the Chief Inspector of Weights and Measures:—

	Genuine	Adulterated
Milk samples examined	67	3
Drugs examined	—	—
Other Foods examined	122	1
Proceedings instituted	—	1
Cautions issued	—	3

In the case of the 3 adulterated milks, 2 were in respect of slight deficiencies in the fat content and cautions were issued by the Clerk of the County Council. In the other case the adulteration consisted of the addition of water and the defendant (a farmer) was prosecuted and convicted. A fine of £5 was imposed and the defendant ordered to pay £4 3s. 6d. costs.

The other food classified by the Public Analyst as “adulterated” was a sample of beef sausage found to contain only 44.6% of meat and the vendor in this case was cautioned by the Clerk of the County Council.

The clean food campaign has been continued, and the Chief Sanitary Inspector has addressed various organisations in the district on clean food methods.

Section VI.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES

The most noteworthy event of the year was the occurrence of a case of smallpox. There were also increases in the number of cases of Scarlet Fever and Measles.

Smallpox

One case of smallpox was notified and confirmed during the year, the patient being a boy aged 16 years and resident in Linthwaite. The patient was admitted to Oakwell Smallpox Hospital, Birstall, where he died.

A full report of this case will be found on page 8a of Section VII of this report.

Diphtheria

During the year one case of Diphtheria was notified but after admission to hospital the diagnosis was not confirmed.

Supplies of Anti-Toxin for the treatment of suspected cases and contacts are obtainable by medical practitioners through the hospital service, stocks being held at the Mill Hill Isolation Hospital, Huddersfield, and the Huddersfield Royal Infirmary. Diphtheria Prophylactic for immunisation can be obtained by medical practitioners on application to the Divisional Medical Officer.

The immunisation campaign continued during the year, the inoculations being carried out by medical practitioners and officers of the County Health Department. Some 55 children of school age and 186 children under 5 years of age received a complete course of injections, whilst 783 children who had been inoculated some years ago received "booster" doses.

Further particulars of immunisations carried out and the immunisation state of the area will be found in Section VII of this report.

Scarlet Fever

During the year 50 cases of Scarlet Fever were notified, all of which were confirmed, as compared with 12 in the previous year. Although the disease was mild in character in most of the cases, 38 of the patients were admitted to Mill Hill Isolation Hospital.

The distribution of the cases in the various wards is shown in the table given below:—

Ward	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Tot'l
North-East (Golcar)	—	4	8	2	5	2	5	—	1	3	1	—	31
South-East (Linthwaite)	—	—	1	1	2	1	3	1	—	1	—	—	10
West (Marsden)	—	—	—	—	—	—	—	—	1	—	—	—	1
North (Scammonden)	—	—	—	—	—	—	—	—	—	—	—	—	—
Central (Slaithwaite)	—	2	—	1	—	—	—	—	1	1	—	3	8
Totals ...	—	6	9	4	7	3	8	1	3	5	1	3	50

Whooping Cough

During the year 24 cases of this disease occurred as compared with 154 in the previous year. The distribution of the cases is given in the following table:—

Ward	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	T'tal
North-East (Golcar)	3	—	—	—	—	—	—	—	—	—	—	3	6
South-East (Linthwaite)	—	1	1	—	1	1	—	2	—	—	—	—	6
West (Marsden)	—	1	—	—	—	—	—	—	—	—	—	—	1
North (Scammonden)	—	—	—	—	—	—	—	—	—	—	—	—	—
Central (Slaithwaite)	3	1	—	2	1	—	—	—	1	—	2	1	11
Totals	6	3	1	2	2	1	—	2	1	—	2	4	24

Measles

A total of 400 cases of Measles were notified during the year as compared with 260 in the previous year. The incidence was widespread throughout the district and was most prevalent in the first 7 months of the year. The distribution of cases is shown in the following table:—

Ward	Jan.	Feb.	Mar.	Apl	May	Jun.	July	Aug.	Sept	Oct.	Nov	Dec.	T't'l
North-East (Golcar)	6	11	6	2	2	57	42	—	—	—	—	—	126
South-East (Linthwaite)	7	1	4	5	31	33	32	1	—	—	—	—	114
West (Marsden)	5	45	79	1	—	—	—	—	—	4	—	—	134
North (Scammonden)	—	1	—	—	1	—	—	—	—	—	—	—	2
Central (Slaithwaite)	5	3	4	3	1	—	8	—	—	—	—	—	24
Totals	23	61	93	11	35	90	82	1	—	4	—	—	400

Acute Primary and Acute Influenzal Pneumonia

There were 17 cases of Acute Primary Pneumonia and 4 cases of Acute Influenzal Pneumonia notified during the year as compared with 21 cases and 3 cases respectively for 1952.

Deaths registered in 1953 as due to all forms of Pneumonia totalled 9 as compared with 4 in the previous year.

The distribution of cases is given in the table shown below:—

Ward	Jan.	Feb.	Mar.	Apl	May	June	July	Aug.	Sept	Oct	Nov.	Dec.	T'tal
North-East (Golcar)	1	5	1	—	—	—	1	1	1	1	—	1	12
South-East (Linthwaite)	—	—	1	—	—	1	—	—	1	—	1	—	4
West (Marsden)	—	—	5	—	—	—	—	—	—	—	—	—	5
North (Scammonden)	—	—	—	—	—	—	—	—	—	—	—	—	—
Central (Slaithwaite)	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	1	5	7	—	—	1	1	1	2	1	1	1	21

Enteric Fever and Dysentery.

One case of Sonne Dysentery was notified during the year, the patient being a male aged 68 years resident in Marsden who made a satisfactory recovery.

No cases of Enteric Fever were notified.

Food Poisoning

No cases of Food Poisoning were notified during the year.

Erysipelas

There were 6 cases of Erysipelas notified during the year as compared with 5 in 1952. Of these cases, 4 were resident in Golcar, and 2 in Linthwaite.

Meningococcal Infections

Two cases of Meningococcal Infection were notified during the year but after admission to hospital the diagnosis was not confirmed in either case.

One death was recorded as due to meningococcal infection during the year.

Acute Poliomyelitis and Acute Polioencephalitis.

During the year one case of Acute Poliomyelitis was notified, but after admission to hospital the diagnosis was not confirmed.

Puerperal Pyrexia

One case of this condition was notified during the year.

Acute Encephalitis

One case of post-infectious encephalitis was notified but after admission to hospital the diagnosis was not confirmed.

Cancer

The number of deaths attributable to Cancer during the year totalled 43 (25 male, 18 female), as compared with 46 in 1952. The Cancer death rate for the year is 1.98 per 1,000 of the estimated population compared with a rate of 2.10 for the previous year. The corresponding rates for the Administrative County and the Aggregate Urban Districts are 1.88 and 1.99 respectively.

Tuberculosis

A total of 13 new cases of Tuberculosis was added to the Notification Register during the year, as compared with 6 in the previous year.

One death from Pulmonary Tuberculosis and one from Non-Pulmonary Tuberculosis were recorded during the year as compared with one death from Pulmonary Tuberculosis in 1952.

The following tables give details of the number of cases on the Notification Register together with particulars of new cases of Tuberculosis and deaths from Tuberculosis during the year:—

	Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female
(a) Number of cases on Register at commencement of year	50	26	19	19
(b) Number of cases notified first time during the year	2	6	3	2
(c) Number of cases restored to Register	1	—	—	—
(d) Number of cases added to Register otherwise than by notification	1	4	—	—
(e) Number of cases removed from the Register	6	3	2	5
(f) Number of cases remaining on the Register	48	33	20	16

Age (years)	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female	Male	Female	Male	Female
0— 1	—	—	—	—	—	—	—	—
1— 5	—	1	—	—	—	—	—	—
5—10	—	—	—	2	—	—	—	1
10—15	—	—	—	—	—	—	—	—
15—20	—	2	1	—	—	—	—	—
20—25	—	1	—	—	—	—	—	—
25—35	—	1	1	—	—	—	—	—
35—45	1	1	—	—	—	—	—	—
45—55	—	—	1	—	—	—	—	—
55—65	1	—	—	—	1	—	—	—
65 and upwards	—	—	—	—	—	—	—	—
Totals	2	6	3	2	1	—	—	1

Colne Valley 1953 **Table showing Cases of Infectious Diseases notified during the Year**

Age distribution of confirmed cases.

Disease	Total Number of cases Notified	Number of cases in which Diagno- sis con- firmed	Number of cases Admitted Mill Hill Isolation Hospital	Deaths	Age distribution of confirmed cases																Over 65						
					Under 1		1-2		2-3		3-4		4-5		5-10		10-15		15-20			20-35		35-45		45-65	
					M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		M	F	M	F	M	F
Measles	400	400	—	—	5	5	15	17	31	21	24	35	35	29	96	84	—	1	—	—	—	—	—	—	—	—	—
Whooping Cough	24	24	—	—	—	—	1	1	3	1	3	2	1	1	9	2	—	—	—	—	—	—	—	—	—	—	—
Acute Primary Pneumonia ...	17	17	—	9a	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Acute Influen- zal Pneumonia	4	4	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ..	50	50	38	—	—	—	—	—	2	—	2	1	1	3	15	17	4	3	1	—	1	—	—	—	—	—	—
Meningococcal Infections ...	2	1c	2	1c	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Anterior Poliomyelitis	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	6	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox	1	1	1b	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pyrexia ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

(a) Deaths from all forms of pneumonia

(b) Admitted to Oakwell Smallpox Hospital, Birstall.

(c) This case was not notified.

COUNTY COUNCIL
OF THE
WEST RIDING OF YORKSHIRE

DIVISION 20

URBAN DISTRICTS OF:—

COLNE VALLEY	KIRKBURTON
DENBY DALE	MELTHAM
HOLMFIRTH	SADDLEWORTH

ANNUAL REPORT
OF THE
Divisional Medical Officer
1953

BY

ERIC WARD

M.R.C.S., L.R.C.P., D.P.H.

Divisional Staff:

Divisional Medical Officer:

E. WARD, M.R.C.S., L.R.C.P., D.P.H.

Senior Assistant County Medical Officers and School Medical Officers:

H. C. MILLIGAN, M.B., Ch.B., D.P.H.

W. P. B. STONEHOUSE, M.R.C.S., L.R.C.P., D.P.H.

(Appointed 11.1.54)

Assistant County Medical Officer and School Medical Officer:

D. SHAW, M.B., Ch.B.

Clinic Medical Officers:

(Part Time)

C. DICKSON, M.B., Ch.B.

A. EDWARDS, L.R.C.P.,

L.R.C.S., L.R.F.P.S.

A. HAND, M.B., Ch.B.

J. LOFTUS, M.B., Ch.B.

L. E. LUCAS, M.B., Ch.B.

H. MERCER, M.B., Ch.B.

H. C. PICKERING, M.R.S.C.,

L.R.C.P.

J. A. STEPHENS, M.R.C.S., L.R.C.P.

J. E. TAYLOR, M.B., Ch.B.

J. G. WALLER, M.B., Ch.B.

M. V. WILBY, M.B., Ch.B.

P. B. WOOD, M.B., Ch.B.

Superintendent Health Visitor:

Mrs. A. CORLESS.

Health Visitors and School Nurses:

Mrs. E. BLEZZARD.

Miss D. BROOKE.

*Mrs. E. FISCHER.

Miss M. FLINTOFF.

Mrs. D. GAINES.

Miss C. A. HOLROYD.

Mrs. E. M. HURLEY.

Miss C. INCHBOARD.

(Appointed 1.7.53)

Miss S. KNOX.

Miss D. MELLOR.

*Mrs. I. MELLOR.

Miss M. I. MORRIS.

Miss M. NUTTALL.

(Appointed 1.7.53)

Mrs. A. ROYSTON.

Mrs. D. SMITH.

(Appointed 1.7.53. Transferred
to Division 3 on 5.8.53)

*Mrs. M. WARD.

Mrs. E. WILLIAMS.

Miss D. WOOD.

* Part-time

Midwives:

Miss E. L. B. BRADLEY.

Mrs. J. CAPES.

Miss A. CHARLESWORTH.

Mrs. J. COOK.

Mrs. H. I. CRAIG.

(Resigned 19.9.53)

Mrs. E. GRAHAM.

Miss M. A. STAFFORD.

Nurse/Midwives:

Miss A. ASPINALL.

Miss A. BEAUMONT.

Miss M. BROOK.

Miss A. E. HITCHEN.

Miss S. JONES.

Miss L. KAYE.

Miss K. M. PURDON.

Home Nurses:

Miss M. BOOTHROYD.

Miss F. M. BURDETT.

(Resigned 31.7.53)

Mrs. N. EARL.

Miss E. HIRST.

(Resigned 12.11.53)

Mrs. K. M. KAYE.

Miss C. LATIMER.

Mrs. J. S. LAUDER.

Miss A. LODGE.

Miss A. McWILLIAMS.

Miss H. G. PEACOCK.

Mrs. N. PLATT.

Miss E. M. PRENTIS.

Miss F. RICHARDSON.

Mrs. H. STURGEON.

Mental Health Social Worker:

Mrs. M. MOORE.

Mental Health Home Teacher:

Miss E. BALL.

Speech Therapist:

Miss M. J. WATKINSON.

Duly Authorised Officer:

Mr. J. THRELFALL.

(Deceased)

Senior Clerk:

Mr. G. A. BEATSON.

INTRODUCTION

In this Section is given a brief account of the services provided by the West Riding County Council in the Division as a whole, under Part III of the National Health Service Act.

During the year the original Division 20 was enlarged by the incorporation of the former Division 21 which was composed of the Saddleworth Urban District. The formal amalgamation dated from the 1st October but in fact Division 21 was administered by the Divisional Medical Officer of Division 20 from December, 1952, and the clerical work was gradually transferred to the Divisional Health Office from March onwards.

The enlarged Division 20 consists of the following County Districts:—

Colne Valley U.D.

Denby Dale U.D.

Holmfirth U.D.

Kirkburton U.D.

Meltham U.D.

Saddleworth U.D.

The Medical Staff of the enlarged Division consists of a Divisional Medical Officer who is also Medical Officer of Health for the 6 Districts in the Division and 2 Senior Assistant County Medical Officers (one of whom is also Deputy Medical Officer of Health for all the County Districts apart from Saddleworth, whilst the other is Deputy Medical Officer of Health for Saddleworth only). In addition there is one full-time Assistant County Medical Officer and 11 part-time Medical Officers who undertake sessional duties at Infant Welfare and Ante-Natal Clinics.

Medical auxiliary staff employed wholly in the Division are one Mental Health Social Worker and one Mental Health Home Teacher whilst the Speech Therapist is shared with Division 19.

Details of the Health-Visiting, Home Nursing and Midwifery Staffs will be found later in this report.

In compiling this Report it is assumed that the amalgamation has been in operation for the whole of the year, no separate reports being given for the former Divisions 20 and 21 prior to October. In all instances the statistics refer to the whole area for the whole year. As, however, identical records were not kept in the two Divisions prior to the amalgamation it is not possible in some instances, to give comparable figures for 1952, but where 1952 statistics are quoted they are the combined figures for the two then existing Divisions.

COMPARATIVE STATISTICS

	Colne Valley U.D.	Denby Dale U.D.	Holmfirth U.D.	Kirkburton U.D.	Meltham U.D.	Saddleworth U.D.	Division No. 20	Aggregate West Riding U.D.'s.	West Riding Admin. County	England & Wales prov. figures
Area (Acres)	16,052	10,165	17,565	14,577	59,06	18,485	82,750	380,334	1,609,759	*
Population	21,670	9,651	18,760	17,610	5,097	16,610	89,398	1,158,200	1,592,600	*
Live Births	298	134	236	208	77	183	1136	17,795	25,026	*
Still Births	7	6	5	6	—	5	29	457	633	*
Deaths	277	125	365	359	62	222	1410	14,462	18,504	*
Deaths under 1 year of age	7	1	7	4	3	8	30	492	733	*
Birth Rate Per 1,000 estimated population (Crude)	13.75	13.88	12.58	11.81	15.11	11.02	12.71	15.4	15.7	15.5
„ (Adjusted)	14.16	14.85	13.08	15.24	15.26	11.35	*	15.5	16.0	15.5
Death Rates All per 1,000 estimated population All Causes (Crude)	12.78	12.95	19.45	20.39	12.16	13.37	15.77	12.5	11.6	11.4
„ „ (Adjusted)	11.63	11.66	16.73	18.55	10.82	12.03	*	12.6	12.1	11.4
Infective and Parasitic diseases excluding T.B. but including Syphilis and other V.D. ...	0.18	—	0.11	0.45	0.20	0.06	0.18	0.09	0.08	*
Tuberculosis of Respiratory system	0.05	0.31	0.11	0.62	0.20	0.12	0.23	0.17	0.16	0.18
Other forms of Tuberculosis	0.05	—	—	0.06	—	—	0.02	0.02	0.02	0.02
Respiratory Diseases (excluding tuberculosis of respiratory system)	1.15	0.31	1.60	1.99	1.77	0.96	1.32	1.39	1.30	*
Cancer	1.98	1.87	2.67	2.90	1.77	1.44	2.18	1.99	1.88	1.99
Heart and Circulatory Diseases	5.35	5.70	8.00	7.16	4.32	6.20	6.40	4.63	4.26	*
Vascular Lesions of the Nervous System	1.80	2.58	3.89	3.29	1.96	1.99	2.64	1.96	1.76	*
Infant Mortality	23.49	7.46	29.66	19.23	38.96	43.72	26.41	27.6	29.3	26.8
Maternal Mortality	—	7.14	—	—	—	—	0.86	0.38	0.51	0.76

* Figures not available.

VITAL STATISTICS

Births.

The number of live births registered in the Divisional area during 1953 was 1,136 (595 males, 541 females), an increase of 11 compared with the previous year.

The CRUDE BIRTH RATE was 12.71 per 1,000 of the estimated population as compared with 12.57 for 1952.

The illegitimate live births numbered 34 or 2.99% of the total live births, a decrease of 2 compared with the previous year.

Deaths.

The deaths assigned to the Divisional area after correction for transfers were 1,410 (703 males, 707 females), an increase of 214 on the total for 1952.

The CRUDE DEATH RATE from all causes was 15.77 per 1,000 of the estimated population as compared with 13.36 for the previous year.

The following were the principal causes of death in order of frequency:—

(i)	Diseases of the Heart and Circulatory System ...	572
(ii)	Intra-Cranial Vascular Lesions	236
(iii)	Malignant Neoplasms	195
(iv)	Respiratory Diseases (excluding Pulmonary Tuberculosis)	118

These 4 causes accounted for 79.22% of the total deaths.

Infant Mortality.

In 1953 the deaths of infants under one year of age numbered 30, the same number as in the previous year. Of these deaths 17 infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE was 26.41 per 1,000 live births as compared with 26.67 for 1952.

The death rate amongst legitimate infants per 1,000 legitimate live births was 25.41 as compared with 25.71 for 1952.

The death rate amongst illegitimate infants per 1,000 illegitimate live births was 58.82 as compared with 55.55 for 1952.

The following table gives the causes of death of all infants at various ages under one year:—

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

Causes of Death	Under 1 day	1-2 days	2-5 days	5-7 days	Total under 1 week	1-2 weeks	2-4 weeks	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total under 1 year
1. Meningococcal Infections ...	—	—	—	—	—	—	—	—	—	—	1	—	1
2. Acute Bronchitis ...	—	—	—	—	—	—	—	—	—	—	—	1	1
3. Pneumonia ...	—	—	—	—	—	1	1	2	2	—	—	2	8
Gastroenteritis ...	—	—	—	—	—	—	—	—	—	—	1	—	1
4. Congenital Malforma- tions ...	—	—	1	—	1	—	—	1	1	2	—	1	5
5. Premature Birth ...	2	1	1	—	4	—	1	5	—	—	—	—	5
6. Injury at Birth ...	1	—	—	—	1	—	—	1	—	—	—	—	1
7. Intra-Cranial Haemorrh- age ...	—	—	1	—	1	1	—	2	—	—	—	—	2
8. Acute Osteomyelitis of tibia with Toxemia	—	—	—	—	—	—	1	1	—	—	—	—	1
9. Asphyxia during or after birth ...	2	—	—	—	2	—	1	3	—	—	—	—	3
10. Other Diseases Peculiar to the First Year of Life	1	1	—	—	2	—	—	2	—	—	—	—	2
TOTAL ...	6	2	3	—	11	2	4	17	3	4	2	4	30

EPIDEMIOLOGY

Food Poisoning.

During the year one case of food poisoning was notified, the diagnosis being confirmed. The patient, a male aged 15 years resident in the Kirkburton Urban District, was nursed at home and made a satisfactory recovery.

The main symptoms were head ache, abdominal pain and diarrhoea. A specimen of stool revealed organism *S. Typhimurium*.

The origin of infection was found to be a pork pie bought in Wakefield where many cases of food poisoning were reported at the same time.

Diphtheria.

One case of diphtheria was notified during the year but this was not confirmed.

According to records available, less than 50% of children under 5 are at present protected. Whilst this figure is probably lower owing to lack of records, than it should be in reality, it is a very disappointing figure and energetic steps should be taken to secure a much higher acceptance rate for young children.

If the fall in the incidence and mortality of diphtheria is to continue it is vital to secure that not less than 75% of babies are immunised before their first birthday, otherwise a return of diphtherial outbreaks is a definite possibility. The virtual disappearance of diphtheria is conditional upon the maintenance of an adequate level of immunisation.

Arrangements for immunisation have continued as in previous years, the inoculations being given at Infant Welfare Centres or by private medical practitioners, and in addition special immunisation sessions have been held in various schools. The response has been reasonably satisfactory and no special mobile campaigns have been held.

Number of Children Immunised in 1953.

Urban District	Full Courses							
	Age and date of Final injection							
	Under 1	1	2	3	4	5 to 9	10 to 14	Total
Colne Valley ...	80	88	9	4	5	40	15	241
Denby Dale ...	14	35	1	2	—	—	—	52
Holmfirth ...	66	76	7	1	6	94	16	266
Kirkburton ...	33	51	6	7	1	114	12	224
Meltham ...	28	22	5	—	1	—	—	56
Saddleworth ...	49	48	6	4	3	13	—	123
Total ...	270	320	34	18	16	261	43	962

Urban District	Secondary Booster Injection							
	Age at date of injection							
	Under 1	1	2	3	4	5 to 9	10 to 14	Total
Colne Valley ...	—	—	—	1	50	446	286	783
Denby Dale ...	—	—	—	—	1	19	2	22
Holmfirth ...	—	—	—	—	28	483	200	711
Kirkburton ...	—	—	—	—	8	252	70	330
Meltham ...	—	—	—	—	22	67	25	114
Saddleworth ...	—	—	—	—	1	30	26	57
Total ...	—	—	—	1	110	1297	609	2017

Records of the immunisation state of children in the Divisional area as at the 31st December, 1953, are shown below.

Age at 31-12-53 i.e., Born in Year	Under 1 1953	1 to 4 1949-52	5 to 9 1944-48	10 to 14 1939-43	Total Under 15
Number immunised	51	2922	6,549	4,220	13,742
Estimated mid- year child popula- tion 1953.	Children under 5 6,170		Children 5-14 11,780		17,950
Percentage of child population immunised	48.18		91.42		76.56

Smallpox.

On the 15th April, 1953, a Linthwaite boy aged 16 employed as a lorry driver's mate with a firm of haulage contractors in the Colne Valley was removed to hospital as a suspected and subsequently confirmed case of Smallpox.

The boy was at work on the 10th April delivering pieces of cloth in Leeds and collecting other pieces in Huddersfield and Colne Valley. On that day he complained of not being well to the driver. On the 11th April he was feverish but remained ambulant, staying indoors. The following evening he felt considerably worse and a rash began to appear on his face.

His probable date of infection was considered to be the 30th March and on that particular day he had visited Leeds and Gildersome. At that time there had been cases of Smallpox occurring in Todmorden, Oldham and Halifax, and shortly before the development of this boy's illness an isolated case occurred in Leeds, and shortly afterwards another one in Gildersome. Despite the most thorough investigation no link could be found between these cases though there is strong presumption that they were infected from a common source.

The case came to the notice of the Health Department on Wednesday the 15th April, when the opinion of a Smallpox consultant was obtained regarding the boy's illness, and immediate removal to Oakwell Isolation Hospital was advised. Subsequent laboratory tests confirmed the case to be Variola Major which became confluent in type and the boy died on the 4th May, on the 25th day of disease.

A detailed history of the boy's movements prior to his sickening on the 10th April was obtained, and a list of names and persons who had visited the house between the 10th and 15th April was prepared. Contacts were divided into 3 classes:—

- (a) Direct households contacts of the case. These were the father, mother and 2 sisters aged 16½ and 15 years. The mother had been vaccinated in infancy; the others had no previous history of vaccination.

(b) Neighbours. Very few of the neighbours had direct contact with the boy between the 10th and 15th April. A list of 10 persons contained the name of one Trade Union Subscription Collector who had visited the house on the 11th April and 2 children of neighbours, who had played about the doors and had on occasions actually been inside the house. Two girls, friends of the boy's sister, had visited the house on the 10th April and spoken to the boy. They were also included.

(c) A list of mills which the boy had visited on the 10th April was obtained, the contacts being mainly warehousemen. The garage depot was visited also and the staff were questioned as to the degree of contact with the boy, and a list of contacts completed.

Supervision of contacts was carried out by the staff of the Health Department. This included 3 medical staff and 11 health visitors. Contacts were offered vaccination and placed under surveillance. Naturally the closest surveillance was kept on the direct household contacts and those who visited the house between the 10th and 15th April. The family contacts were visited twice daily, vaccinated and re-vaccinated. On the 18th April the 2 sisters were given 25 c.c. of convalescent intrasera muscularly since it was considered that they were in the greatest danger. The serum was obtained from a case which had developed Smallpox in Todmorden and subsequently recovered.

All 4 developed satisfactory re-action to vaccination but on the 21st April they were removed to hospital as a precautionary measure. Apart from being slightly pyrexial whilst the vaccinations were taking they remained well and developed no other signs or symptoms.

Amongst the neighbours surveillance was carried out daily until the 19th April and thereafter twice daily until the "all clear" was given on the 2nd May. In addition to the 3 members of the family who were working 6 others were advised to stay off work, between the 20th and 28th April as a precautionary measure. All these contacts were carefully examined and temperatures taken twice daily. One contact who had visited the house on Saturday, 11th April, developed a temperature of 99.4 on the 21st April. This man's temperature remained up and on the morning of the 22nd it was 99.8. As this was the 12th day following exposure he was removed to Oakwell Hospital for observation. No further signs or symptoms developed. Another contact, a child of 7, had a temperature of 101.4 on the 22nd April and on the morning of the 23rd 99.8. He had no other symptoms but it was decided to remove him to hospital for further observation. A third contact, a youth aged 17, who had visited the boy on the evening of Sunday, 12th April, had a temperature of 99.6 on the 22nd which remained up until the following morning when it was 99.8. He also developed no signs or symptoms.

Supervision of contacts at work was less rigorously carried out since it was considered that the risks of contracting infection were very slight. Nevertheless mills were visited daily and the garage depot twice daily and all contacts were kept under close medical supervision.

No further cases developed and the family were released from quarantine on the 1st May, a cautious "all clear" being given on the following day.

Throughout this period there was considerable demand for vaccination by members of the general public. Through the medium of the press, to which thanks are extended for their co-operation, the general public was advised that mass vaccination was quite unnecessary, vaccination being freely available to those contacts at risk. Despite this, however, the demand for vaccination became so great that it was necessary to open clinics at Golcar and Linthwaite to cope with the large numbers of persons seeking protection. The total number of vaccinations performed in the Colne Valley during the year was 8,652 which compares with 100 in the previous year and a total of 542 during the preceding 5 years.

During this period it was the policy of the Health Department to interfere as little as possible with the ordinary working of industry and only 9 persons were actually advised to stay off work, but some dislocation was caused to industry through sickness arising from vaccination than that due to a single case of Smallpox in the area. There is no doubt that infant vaccination is much less likely to be followed by severe reactions than primary vaccination in adult life, and it is undoubtedly true that much morbidity could have been prevented if the policy of infant vaccination had been more freely accepted by the public.

The number of records of vaccinations and re-vaccinations received from General Practitioners during the year was 8,458 and 5,824 respectively, as compared with 377 and 94 in the previous year. In addition, 1,198 vaccinations and 992 re-vaccinations were carried out by the staff of the Health Department.

Details of the various age groups vaccinated and re-vaccinated are given below.

District	VACCINATIONS					Total Vaccinations
	Under 1	1	2—4	5—14	15 +	
Colne Valley ...	182	158	515	1592	2522	4969
Denby Dale ...	26	21	86	338	347	818
Holmfirth ...	135	68	224	810	828	2065
Kirkburton ...	69	31	95	317	364	876
Meltham ...	24	24	47	216	215	526
Saddleworth ...	48	22	53	121	158	402
Grand Totals ...	484	324	1020	3394	4434	9656

District	RE-VACCINATIONS					Total Re-Vaccinations
	Under 1	1	2—4	5—14	15 +	
Colne Valley ...	3	7	58	441	3174	3683
Denby Dale ...	1	1	6	34	210	252
Holmfirth ...	2	2	24	331	1350	1709
Kirkburton ...	—	—	12	108	475	595
Meltham ...	—	—	4	75	280	359
Saddleworth ...	—	—	4	44	170	218
Grand Totals ...	6	10	108	1033	5659	6816

No cases of Generalised Vaccinia or Post-Vaccinal Encephalomyelitis were reported, and no deaths from any complications of vaccination occurred during the year.

Whooping Cough.

The restricted scheme for the immunisation of children against Whooping Cough has continued throughout the year. Supplies of vaccine can be obtained by medical practitioners on application to the Divisional Medical Officer and children up to the age of 4 years may be immunised.

The inoculations have been carried out by private medical practitioners and at Infant Welfare Centres and during the year 200 children received protective treatment.

MIDWIFERY AND MATERNITY SERVICES

Domiciliary Midwifery.

The number of cases attended by the domiciliary midwives continues to fall. In 1949 the number of cases attended was 477. In 1951 it was 380 and by 1953 it had fallen to 336.

This falling off has necessitated a review of the policy of having separate staffs for midwifery and home nursing. Whilst it is generally agreed that a separate midwifery service is desirable, it is not in the best interests of the patients if this can only be obtained by giving the fairly large districts to each full-time midwife in order to provide a reasonable number of patients. In order to overcome the difficulty, certain of the whole-time midwives have agreed to undertake home-nursing duties and become nurse-midwives. This policy will be followed where desirable when vacancies occur in the future.

At the commencement of the year 8 whole-time midwives, 2 nurse/midwives, and 2 relief nurse/midwives were engaged in the Division. During the year a whole-time midwife resigned her appointment and 3 midwives were re-appointed nurse-midwives. With the amalgamation of the Saddleworth Urban District on the 1st October, 1953, 2 whole-time midwives were taken on to the Divisional staff.

The position regarding midwifery services at the end of the year was as follows:—

Urban District	Authorised Establishment	Staff at 31st December, 1953	
		Whole-time Midwives	Nurse/Midwives
Colne Valley	3	1	—
Denby Dale	2	—	2
Holmfirth	2	2	—
Kirkburton	2	1	2
Meltham	1	—	1
Saddleworth	2	2	—
Relief	2	—	2
Division 20	14	6	7

No independent midwives signified their intention to practice in the area.

Of the 1,179 births notified and attributed to the Division, 340 occurred at home. The following table shows the number of cases attended:—

MIDWIFE	CONFINEMENTS		HOME VISITS	
	As Midwife	As Mat. Nurse	Ante-Natal	Post-Natal
Whole-time County Midwives.				
Bradley	31	1	302	797
Capes	31	10	372	1013
Charlesworth	32	—	313	665
Cook	32	2	277	859
Craig (Resigned 19/9/53)	7	—	47	195
Graham	25	1	453	592
Stafford	29	3	304	572
	187	17	2068	4693
Nurse/Midwives.				
Aspinall	28	4	209	649
Beaumont	14	2	149	385
Brook	11	—	141	245
Hitchen	9	—	20	190
Jones	30	2	283	712
Kaye	9	—	87	213
Purdon	23	—	228	611
	124	8	1117	3005
Independent Midwives.	—	—	—	—
Total	311	25	3185	7698

Of the cases attended 2 were twin births, 2 were patients who normally resided outside the Division (outward transfers) and 6 were patients attended on behalf of a neighbouring Division. Thus 330 of the births attended were attributed to the Division. Of the remaining 10 births attributed to the Division 6 were attended by medical practitioners and transferred immediately to hospital and 4 by midwives from a neighbouring Division.

In addition, 23 miscarriages were also attended by domiciliary midwives.

The services of the domiciliary midwives are offered to all patients who are confined in hospitals or maternity homes but are discharged home before the 14th day of the puerperium. During the year 303 such patients received nursing care, 1,155 individual visits being paid to them. Further details are given in the table on page 15a.

Notifications:

The following notifications were received from midwives practising in the Division:

Death of Child	9
Stillbirths	9
Artificial Feeding	32
Laying out the Dead	1
Liability to be a source of infection	6

Medical Assistance:

Medical aid forms sent in by midwives during 1953 numbered 176 (134 domiciliary, 42 institutional). The following table summarises the cases for which medical aid was sought:

PREGNANCY				LYING-IN					
		Dom.	Inst.			Dom.	Inst.		
Albuminuria	...	...	1	—	Anaemia	...	...	1	—
Ante-Partum Haemorrhage		4	—	Condition of Breast	...	7	—		
Glycosuria	...	...	2	—	Leg Pains	...	...	2	—
Pre-eclampsia	...	...	2	—	Phlebitis	...	...	1	—
Threatened Abortion	...	1	—	Pyrexia	...	...	3	—	
				Skin Condition	...	...	1	—	
			10	—				15	—
LABOUR				THE CHILD					
Ante-Partum Haemorrhage	1	—		Asphyxia	...	...	3	—	
Episiotomy	...	...	6	2	Cyanosis	...	...	2	—
Malpresentation	...	...	4	1	Deformities	...	...	2	—
Notification of labour	...	1	—	Discharging Eyes	...	...	5	—	
Post-Partum Haemorrhage	1	—		Feeding difficulties	...	...	1	—	
Premature labour	...	1	—	General Condition	...	...	2	—	
Prolonged Labour	...	5	11	Haemorrhage	...	...	2	—	
Pyrexia	...	...	2	—	Jaundice	...	...	1	—
Retained Placenta	...	3	1	Paronychia	...	...	1	—	
Ruptured Perineum	...	62	27	Skin Condition	...	...	2	—	
				Stillbirth	...	...	1	—	
				Vomiting	...	...	1	—	
			86	42				23	—

Gas and Air Analgesia:

At the end of 1953, all the 13 midwives in domiciliary practice held the certificate in Gas and Air Analgesia administration and were equipped with the necessary apparatus.

Analgesics were administered by domiciliary midwives to 232 cases, or 69.05% of the cases attended, as compared with 223 cases in 1952.

Pethedine was administered by domiciliary midwives to 187 cases, or 55.65% of the cases attended.

Ante-Natal Clinics.

There are 4 separate Ante-Natal Clinics in the Division whilst occasional patients are seen at the Infant Welfare Clinics.

During the year 135 patients made 405 attendances at the various clinics, details of which are given in the following table:—

Clinic	No. of sessions	No. of patients	No. of attendances	Average attendance per session
Lepton ...	12	25	53	4.42
Meltham ...	12	20	61	5.08
Springhead ...	12	29	122	10.17
Uppermill ...	12	26	66	5.50
*Denby Dale ...	9	9	20	2.22
*Golcar ...	8	6	15	1.88
*New Mill ...	3	4	5	1.67
*Skelmanthorpe ...	12	14	59	4.92
*Slaithwaite ...	4	2	4	1.00
Total ...	84	135	405	4.82

* Patients seen at Infant Welfare Clinics.

It will be seen that the attendance figures compare unfavourably with the previous year when 123 patients made 527 attendances.

No special Post-Natal Clinics were held but patients are seen for post-natal examination at the Ante-Natal Clinics. The attendances, however, leave much to be desired. More could be done by way of special visits by health visitors but staffing difficulties prevent this.

Relaxation Classes.

Relaxation classes for expectant mothers have continued to be held at Slaithwaite and Springhead and were introduced at Denby Dale in July, 1953. Where possible these classes are attended by a Health Visitor who gives instruction in mothercraft.

During the year 82 patients made 440 attendances as follows:—

Clinic	No. of Sessions	No. of Patients	No. of attendances	Average attendance per session
Denby Dale	20	12	75	3.75
Slaithwaite	50	40	270	5.40
Springhead	24	30	95	3.96
Total	94	82	440	4.68

It is hoped that additional classes will shortly be commenced at Holmfirth, Lepton, Meltham, and New Mill.

“ Flying Squad ” Arrangements.

“ Flying Squads,” based on the Huddersfield Royal Infirmary and the Maternity Block, Boundary Park Hospital, Oldham, are available for dealing with emergencies arising in the domiciliary midwifery service. The “ squads ” consist of an obstetrical consultant together with nursing staff, and provides facilities for blood transfusion and other emergency treatment.

Normally the call for the services of the “ squads ” is made to the hospital by the general practitioner attending the case, but a call for assistance can be made direct by the midwife if the urgency and time available precludes her from getting in touch with the patient’s own doctor first.

The “ squad ” was not called upon to attend any patient in this Division during the year.

Ante-Natal Hostel.

There were no admissions to the Brighouse Ante-Natal Hostel from this division during the year.

Institutional Midwifery.

No difficulty has been experienced regarding maternity accommodation, the majority of expectant mothers being able to secure admission to the institution of their own choice.

Of the 1,179 births attributed to the Division, only 340, or 28.84% took place at home, as compared with 335 or 28.95% for the previous year.

A summary of the cases for which medical aid was sought by midwives in institutions is given on Page 13a.

Owing to shortage of staff, however, patients are from time to time discharged before the 14th day, as will be seen from the following table.

The Divisional Medical Officer is informed by the hospital authorities when these early discharges are to take place, and arrangements are made for the appropriate domiciliary midwife to attend the patient at home until the 14th day of the puerperium.

	Day of Discharge											Total
	3	4	5	6	7	8	9	10	11	12	13	
Colne Valley U.D.												
No. of Patients ...	1	—	—	—	1	15	9	34	21	3	1	85
No. of Visits ...	15	—	—	—	3	57	37	104	56	9	2	283
Denby Dale U.D.												
No. of Patients ...	—	—	—	—	—	2	4	27	11	4	1	49
No. of Visits ...	—	—	—	—	—	11	15	114	30	10	2	182
Holmfirth U.D.												
No. of Patients ...	—	—	—	—	—	1	2	13	1	1	1	19
No. of Visits ...	—	—	—	—	—	10	12	131	5	2	2	162
Kirkburton U.D.												
No. of Patients ...	—	—	—	—	—	4	9	24	22	3	1	63
No. of Visits ...	—	—	—	—	—	24	46	97	59	7	1	234
Meltham U.D.												
No. of Patients ...	—	—	—	—	—	1	4	10	7	—	1	23
No. of Visits ...	—	—	—	—	—	4	23	39	21	—	2	89
Saddleworth U.D.												
No. of Patients ...	—	—	—	—	—	1	7	24	21	8	3	64
No. of Visits ...	—	—	—	—	—	7	21	90	70	12	5	205
Total No. of Patients	1	—	—	—	1	24	35	132	83	19	8	303
Total No. of Visits ...	15	—	—	—	3	113	154	575	241	40	14	1155

Details of the places of confinement of patients from the various districts are shown in the following table.

ADMISSIONS TO MATERNITY HOSPITALS

Place of Confinement	Colne Valley	Denby Dale	Holmfirth	Kirkburton	Neltham	Saddleworth	Total
Princess Royal Maternity Home	119	64	15	88	30	—	316
Woodfield Maternity Home	—	—	—	—	—	21	21
Holme Valley Memorial Hospital	—	2	162	5	3	—	172
St. Luke's Hospital, Huddersfield	85	6	3	28	11	—	133
Huddersfield Royal Infirmary	19	6	2	19	11	—	57
Boundary Park General Hospital	—	—	—	—	—	65	65
Lakes Hospital, Ashton-U-Lyne	—	—	—	—	—	20	20
Other Maternity Hospitals	—	1	—	3	—	1	5
Other General Hospitals	3	6	—	7	1	7	24
Private Nursing Homes	10	3	1	9	1	2	26
Total Institutional	236	88	183	159	57	116	839
Domiciliary	73	57	59	64	21	66	340
Total Confinements	309	145	242	223	78	182	1179

CHILD WELFARE

Infant Welfare Clinics.

There are in the Division 16 Infant Welfare Centres and 1 Weighing Centre. Apart from the centre at Golcar all are held in hired premises. As the hired premises are only available for sessional use, difficulties are experienced at some regarding access to records and stores at times other than during actual clinic sessions. At others storage facilities are inadequate. All suffer from the disadvantage of being built for some other purpose and improvisation is needed in order to use them for clinic purposes. Equipment has to be brought out before each session and packed away again at the conclusion. This entails much labour on the part of the health visitors. In spite of these disadvantages it is not reasonable to suggest that all centres should be accommodated in premises designed and solely used for clinics. A compromise would be to erect specially designed premises at a central point in each Urban District and to retain some of the outlying premises as monthly and fortnightly weighing centres.

Weekly clinic sessions are held at Delph, Golcar, Greenfield, Holmfirth, Honley, Kirkburton, Lepton, Linthwaite, Marsden, Meltham, New Mill, Slaithwaite, Springhead and Uppermill, whilst clinics are conducted twice monthly at Denby Dale and Skelmanthorpe.

During the year 2805 children were seen and a total of 23,306 attendances were made, details of which are shown in the following table, as compared with 2,601 children and a total of 24,213 visits in the previous year.

Clinic	No. of sessions	No. of children who attended and who were born in:—				No. of attendances by children who at date of attendance were:—				Average attendance per Session		
		1948										
		1953	1952	-51	Total	-1 yrs.	1-2 yrs.	2-5 yrs.	Total	-1 yr.	1-2 yrs.	2-5 yrs.
Delph	49	13	21	46	80	435	284	881	1600	8.88	5.80	17.98
Golcar	52	65	63	74	202	1267	390	261	1918	24.37	7.50	5.02
Greenfield ...	51	32	33	56	121	611	365	698	1674	11.98	7.16	13.69
Holmfirth ...	51	74	94	124	292	932	380	368	1680	18.27	7.45	7.22
Honley	50	32	54	114	200	592	307	288	1187	11.84	6.14	5.76
Kirkburton ...	48	27	34	41	102	321	117	106	544	6.69	2.44	2.21
Lepton	49	58	40	57	155	443	147	147	737	9.04	3.00	3.00
Linthwaite ...	48	48	49	79	176	888	402	393	1683	18.50	8.38	8.19
Marsden	52	51	64	132	247	1067	526	754	2347	20.52	10.12	14.50
Meltham	47	48	42	116	206	876	295	482	1653	18.64	6.28	10.26
New Mill	52	34	43	115	192	583	386	550	1519	11.21	7.42	10.58
Slaithwaite ...	50	30	43	112	185	459	373	704	1536	9.18	7.56	14.08
Springhead ...	49	61	131	106	298	1107	774	589	2470	22.59	15.79	12.02
Denby Dale ...	24	37	47	42	126	480	202	159	841	20.09	8.42	6.63
Skelmanthorpe	24	38	42	21	101	482	100	31	613	20.08	4.17	1.29
Uppermill ...	51	40	39	43	122	571	373	360	1304	11.20	7.31	7.06
Total	747	688	839	1278	2805	11114	5421	6771	23306	14.88	7.26	9.06

The monthly sessions of the Weighing Centre at Emley have continued, 24 individual children having made 87 attendances, as compared with 16 children making 118 attendances in 1952.

Premature Babies.

During the year 61 babies weighing 5½lb. or less were born in hospitals or nursing homes to mothers normally resident in the Division, and 13 were born at home. Of those born at home, one died during the first 48 hours and the remaining 12 survived at the end of one month. Particulars of survival are shown in the following table:

THE FATE OF PREMATURE BABIES BORN IN THE DIVISIONAL AREA

Weight Group lbs.	Number of Premature Births						Number Dying (days of survival).														Over 14 up to 28 days	Number Surviving Over 28 Days				Percentage Survival in 1953	Percentage Survival in 1952	
	Born Alive					Born Dead	First Week							Second Week								A	B1	B2	C			T
	A	B1	B2	C	T		1	2	3	4	5	6	7	8	9	10	11	12	13	14								
5-5½	10	-	16	26	46	1	4	1	1	-	-	-	-	-	-	-	-	-	-	-	1	9	-	10	23	42	91.3	100.0
4½-5	2	-	7	4	13	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	6	4	12	92.3	91.7
4-4½	-	-	1	3	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	4	100.0	87.5
3½-4	1	-	2	4	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	4	7	100.0	75.0
3-3½	-	-	1	2	3	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	66.7	40.0
2½-3	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	00.0	00.0
2-2½	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	100.0	00.0
1½-2	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	00.0	00.0
	13	-	22	39	74	6	2	2	1	-	-	-	-	-	-	-	-	-	-	-	1	12	-	20	36	68	91.9	83.3

Total adjusted live births 1150
 Number of live premature births 74
 Percentage of total live births 6.4
 Number born dead 6

A: Born at home and attended by a midwife.
 B1: Born in a Private Nursing Home.
 B2: Born in a Maternity Home.
 C: Born in a General Hospital.
 T: Total.

At the end of the year there were 2 midwives who had special training in the care of premature babies, having attended a course at the Sorrento Hospital, Birmingham.

Two premature baby outfits are available in the Division and are kept at the Divisional Health Office, Golcar, and at the Mechanics' Institute, Uppermill. Arrangements are made for the outfit to be conveyed by ambulance to any household where its use is thought to be advisable by the midwife. During the year the outfit at Golcar was called into use on one occasion.

Day Nurseries.

There are no day nurseries in the Division.

Nurseries and Child Minders' Regulations Act, 1948.

One person in the Division is registered as a child minder; she is the propriortress of a small kindergarten school in Saddleworth and the permitted number of children she may mind is 10.

The industrial nursery at "Oakdene," Horsforthe Road, Greenfield was re-opened in January with 8 children aged between 2 and 5 years in attendance, and with the approved number of places having been increased from 14 to 18.

These premises were visited by the Department's medical staff during the year.

SCHOOL HEALTH SERVICE

Introduction.

This account of the School Health Service is a Divisional report and is a combination of the reports already presented to the Upper Agbrigg Divisional Executive and the Saddleworth District Sub-Committee.

As with other sections of the Divisional Medical Officer's Report, all statistics relate to the whole Division for the whole year.

The inclusion of the former Division 21 in Division 20 increased the number of schools or separate departments to 80 and the school population to approximately 11,500. The policy of visiting each school twice yearly for the purpose of routine medical inspections has been introduced in the Saddleworth area and has continued in other parts of the Division. As in previous years the defects found which required treatment or observation were namely, defective vision, defective speech, enlarged tonsils and adenoids and minor degrees of flat feet. The ascertainments of affected pupils in need of special educational treatment has continued cases being added to the list during the year, making a total of 261 at the end of the year.

Whilst it is now much easier to secure the admission of delicate children to Open-air Schools there is still great difficulty in placing educationally sub-normal pupils either in special schools or arranging special educational treatment for them in ordinary schools.

It will be seen again that there is no reference in the report to the School Dental Service. This is because it was virtually non-existent in this District during the period in review. Attempts to recruit Dental

Officers have continued but without success. It is however very pleasing to report that the services of two Dental Officers have recently been secured and they are now working in the Division.

Schools in the Area.

There are in the Division 80 schools or separate departments, which include the Royd Edge Special School, Meltham.

The approximate number of pupils on the registers in December, 1953, was 11,455 (an increase of 292 as compared with the previous year) and was composed of:

Infants	Juniors	Seniors
3,481	4,832	3,142

Of the 73 Primary and "Through" Schools 37 are Voluntary and 36 are County Schools.

The distribution is as follows:—

Type of School	Colne Valley		Denby Dale		Holmfirth		Kirkburton		Meltham		Saddleworth		Total	
	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils
Primary	8	961	9	1020	15	1628	13	1428	5	506	11	1225	61	6768
Secondary Modern ...	1	283	1	548	1	480	1	264	—	—	1	300	5	1875
Through	10	1715	—	—	—	—	1	296	—	—	1	203	12	2214
Grammar	—	—	—	—	1	545	—	—	—	—	—	—	1	545
Special	—	—	—	—	—	—	—	—	1	53	—	—	1	53
All Types	19	2959	10	1568	17	2653	15	1988	6	559	13	1728	80	11455

Pupils from Colne Valley attend Royds Hall Grammar School and pupils from Saddleworth attend Hulme, Oldham and Manchester Grammar Schools, but so far as the School Health Service is concerned they are the responsibility of the Huddersfield and Oldham County Borough Councils, and of the Medical Officers of the Independent Schools.

Some pupils from outlying parts of the Division attend Grammar Schools at Mirfield, Penistone, etc.

Medical Inspections.

The periodic medical examination of the three age groups, i.e. entrants (5 years +), intermediate (10 years +) and seniors (14 years +) continued throughout the year, and in addition it was decided in October to introduce a further age group for periodic inspection, i.e. juniors (7 years +). In all 168 separate inspections were carried out at the 80 schools in the Division. As in previous years pupils continuing attendance at school beyond the age of 15 years were given additional routine medical examinations at 16 and 18 years. Re-examinations of children who at previous periodic or special examinations had been found to have defects requiring treatment or observation were made at each school medical inspection.

Periodic Medical Inspections....

During the year 3906 periodic inspections were carried out as compared with 3559 in 1952.

The number of children inspected in the various age groups is as follows:—

Prescribed age groups :

Entrants	...	...	...	...	1600
7 to 8 year group	...	...	...	...	567
Last year primary	...	...	...	...	957
First year secondary	...	...	...	...	46
Last year secondary	...	...	...	...	736
Total	..	...	...	...	3906

Findings of Medical Inspections

The following figures show the incidence of certain defects in the 3906 children who were examined at the periodic inspections :—

Defect or Disease	No of Children Requiring	
	Treatment	Observation
Nose or Throat	50	316
Speech	30	36
Cervical Glands	6	132
Heart and Circulation	9	23
Lungs	23	94
Orthopædic	84	168

Further details will be found in the Table on Page 23a.

Particulars of the age grouping of children found at periodic medical inspections to require treatment are given below :—

Groups	For Defective Vision (excluding Squint).	For any of the other conditions recorded in table of defects	Total Individual Pupils
Entrants	6	222	225
7 to 8 year group	14	36	40
Last year primary	26	48	74
First year secondary	2	4	6
Last year secondary	18	25	42
TOTAL	66	335	387

General condition of children.

All pupils at routine medical inspections are classified as to their general condition at the time of the inspection as follows:—

“A” (Good) — those better than normal.

“B” (Fair) — those normal.

“C” (Poor) — those below normal.

Details of the children inspected during the year are as follows:—

Age Groups	Number of Pupils Inspected	(A) Good		(B) Fair		(C) Poor	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
Entrants	1600	789	49.3	776	48.5	35	2.2
7 to 8 year group	567	236	41.6	319	56.3	12	2.1
Last year primary	957	412	43.0	529	55.3	16	1.7
First year secondary	46	15	32.6	31	67.4	—	—
Last year secondary	736	273	37.1	451	61.3	12	1.6
TOTAL	3906	1725	44.2	2106	53.9	75	1.9

Special Examinations.

The first time in each year that a child is examined, other than at a routine periodic inspection, is regarded as a "Special Examination." Thus all children with defects which were noted in the previous year and who are seen again are classified as "Specials" at the first examination in each year, and as "Follow-ups" at each subsequent examination in the same year. So far as is practicable all children with known defects are examined twice in each year.

Other Examinations.

In addition to routine, special, and follow-up examinations of children at school medical inspections a total of 368 children were examined at home or at school for various reasons. These include non-attendance at school, fitness to attend school camps, and also those examined with a view to providing special educational treatment.

Defects Found at Medical Inspections.

The following table gives details of all defects noted at both periodic and special examinations. All defects noted at medical inspections as requiring treatment are included, whether or not this treatment was begun before the date of the inspection.

Defect or Disease.	Number of Defects.			
	Periodic Inspections		Special Inspections	
	Requiring Treatment	Requiring Observation but not treatment	Requiring Treatment	Requiring Observation but not treatment
Skin	9	27	—	14
Eyes: (a) Vision	66	448	37	542
(b) Squint	14	67	4	28
(c) Other	5	16	1	9
Ears: (a) Hearing	7	20	2	20
(b) Otitis Media	3	21	1	12
(c) Other	5	11	4	21
Nose or Throat	50	316	22	303
Speech	30	36	32	38
Cervical Glands	6	132	4	93
Heart and Circulation	9	23	—	19
Lungs	23	94	4	63
Developmental (a) Hernia	—	5	1	7
(b) Other	1	19	3	8
Orthopaedic (a) Posture	—	25	2	11
(b) Flat Foot	40	47	12	44
(c) Other	44	96	14	143
Nervous System (a) Epilepsy	9	4	3	3
(b) Other	48	22	15	25
Psychological (a) Development	1	111	3	29
(b) Stability	7	11	2	4
Other	24	36	3	35
TOTAL	401	1587	169	1441

Uncleanliness.

Methods of dealing with head infestation have continued as described in previous reports. Routine inspections are carried out at all schools as far as possible at least once every term. Parents of children found to be infested with vermin or nits are sent a communication from the Divisional Health Office and where possible visited by the School Nurse. The more heavily infested cases are excluded from school for a few days and if no improvement has been effected by the parents a Cleansing Notice is issued under Section 54 (2) of the Education Act, 1944. The Notice informs the parents that the child must be cleansed to the satisfaction of an Authorised Officer of the Authority within 48 hours and failing that a Cleansing Order may be issued authorising the cleansing of the child by an officer appointed by the Education Authority.

In the Division, excluding Saddleworth, the total number of inspections made was 31,425 and 625 instances of infestation were found as compared with 31,175 and 631 respectively in 1952. There were 307 individual children (3.2% of the school population) found to be infested on at least one occasion, a reduction of 78 as compared with the previous year.

In the Saddleworth Urban District 46 individual children were found to be infected on at least one occasion (2.66% of the school population).

The problem of head infestation still remains a matter of serious concern but it is pleasing to report that the number of individual children found to be infested has shown a continuing improvement, particularly when it is remembered that a much higher standard is now expected and that all infestations, however slight, are recorded. This improvement is no doubt due to the more constant supervision given by the School Nurses.

Total number of warning letters sent	258
Total number of exclusive notices served	40
Total number of home visits paid	237
Total number of individual children found to be verminous	307
Total number of Cleansing Notices issued	9
Total number of Cleansing Orders issued	6

(As all the figures in respect of the Saddleworth Urban District are not available none have been included).

When a child who has been cleansed by an officer of the Education Authority as a result of a Cleansing Order is found at a subsequent inspection to be re-infested the Authority may take proceedings against the parents under Section 54 (3) of the Education Act for allowing re-infestation to take place. There were no prosecutions during the year.

Arrangements for Treatment.

School Clinics.

There are no special school clinics set up in this Division but minor ailments receive attention and "booster" doses of diphtheria prophylactic are given at 16 Infant Welfare Clinics in the area. During the year a total of 970 attendances were made by school children at such clinics.

Special Clinics.

Ophthalmic Clinics.

The arrangements detailed in my report for the year 1950 have continued, Dr. J. V. Kirkwood devoting two sessions per week to clinics in this Division. Additional sessions are arranged when necessary.

During the year 82 special clinic sessions were arranged and these were attended by 643 children who made 781 attendances. Spectacles were prescribed for 195 children, 262 were found not to require any change, and 186 did not require spectacles. The number of children who attended for re-checking of glasses newly obtained was 138.

Cases requiring orthoptic treatment may obtain this either through the hospital service or, if in the Saddleworth Area, they may attend the Orthoptic Clinic, Scottfield, Oldham, which is provided by the Oldham Education Committee. A charge of 5/- per attendance is paid by the West Riding Education Committee.

Ear, Nose, and Throat Clinics.

The special Ear, Nose, and Throat Clinic for West Riding children conducted by Mr. W. O. Lodge, M.D., F.R.C.S., has been continued at the Huddersfield Royal Infirmary. During the year 6 sessions were held and 104 individual children were seen, 31 being referred for operative treatment.

Children from the Saddleworth area are referred to the out-patient department at the Boundary Park General Hospital. Of the 31 cases referred 17 were recommended operative treatment.

Orthopædic Clinics.

The special monthly session for West Riding children has continued at the Huddersfield Royal Infirmary. At the 11 sessions held during the year 200 individual children made a total of 228 attendances. In addition 4 children from the Saddleworth area were referred to the Gainsborough Avenue Clinic, Oldham.

The conditions for which they were referred were as follows:—

Flat Foot	...	...	...	...	...	...	46
Claw Foot	...	...	...	...	...	...	3
Knock Knee	...	...	...	...	...	...	53
Genu Varum	...	...	...	...	...	...	2
Other Deformities of Toes	...	...	...	...	...	...	19
Fractures	...	...	...	...	...	...	12
Postural Deformities	...	...	...	...	...	...	11
Other Deformities	...	...	...	...	...	...	11
Congenital Conditions	...	...	...	...	...	...	12
Acute Poliomyelitis	...	...	...	...	...	...	7
Perthes Disease	...	...	...	...	...	...	4
Tubercular Conditions	...	...	...	...	...	...	2
Other Conditions	...	...	...	...	...	...	22
							<hr/> 204

Child Guidance Treatment.

Dr. M. M. Mac Taggart, the County Psychologist, has continued to hold clinics at Wakefield, Shipley, and Mirfield, and 31 children have received treatment. In addition, regular visits have been made by her to the Royd Edge Special School, Meltham.

Ultra-Violet Ray Treatment.

Facilities are now available for treatment by Ultra-Violet Radiation at Golcar, Holmfirth, Denby Dale and Uppermill. Cases for treatment are referred by School and Infant Welfare Medical Officers and by General Practitioners. During the year 119 children received courses of treatment.

Speech Therapy.

Sessions for Speech Therapy have continued throughout the year, these being held at the Divisional Education Office, Huddersfield, the unused Dental Clinic at Honley, the Divisional Health Office, Golcar, the Youth Employment Offices, Uppermill, Scholes County School, Nields County School and Kirkburton C. of E. School.

During the year 206 sessions were held at the various centres.

Details of the children treated are shown in the following table:—

	Stammers	Speech Defects
No. of new cases admitted for treatment during the year	11	54
No. of cases already attending for treatment from previous year	35	58
Total No. of cases treated	46	112
No. of cases discharged during year: -		
Speech normal	9	34
Unsuitable for treatment	1	5
Left school	2	4
By reason of non-attendance	—	—
No. of cases awaiting treatment at the end of year	4	12
No. of visits made to schools	2	
No. of home visits	3	

Treatment Tables.

The following tables give details of treatment given to school-children under the Authority's schemes and otherwise. The treatment provided otherwise than by the Authority includes all treatment known by the Authority to have been so provided, including treatment undertaken in school clinics by the Regional Hospital Board.

1. Diseases of the Skin.

	Number of cases treated or under treatment during the year.	
	By the Authority	Otherwise
Ringworm: (i) Scalp	—	—
(ii) Body	—	—
Scabies	2	—
Impetigo	17	4
Other Skin Diseases	18	10
Total	37	14

2. Eye Diseases, Defective Vision, and Squint.

	Number of cases dealt with.	
	By the Authority	Otherwise
External and Other, excluding Errors of Refraction and Squint	—	29
Errors of Refraction, including Squint	—	683
Total	—	712
Number of Pupils for whom Spectacles were: (a) Prescribed	—	307
(b) Obtained	—	302

3. Diseases and Defects of Ear, Nose, and Throat.

	Number of cases treated.	
	By the Authority	Otherwise
Received Operative Treatment:—		
(a) For diseases of the Ear	—	2
(b) For Adenoids and chronic Ton- sillitis	—	188
(c) For other Nose and Throat con- ditions	—	10
Received other forms of treatment ...	49	10
Total	49	210

4. Orthopædic and Postural Defects.

(a) Number treated as in-patients in Hospitals	3	
	By the Authority	Otherwise
(b) Number treated otherwise, e.g. in Clinics or Out-Patient Departments	—	13

5. Child Guidance Treatment.

	Number of cases treated.	
	In the Author- ity's Child Guid- ance Clinics	Elsewhere
Number of Pupils treated at Child Guidance Clinics	31	—

6. Speech Therapy.

	Number of cases treated.	
	By the Authority	Otherwise
Number of Pupils treated by Speech Therapist	158	2

7. Other Treatment Given.

	Number of cases treated.	
	By the Authority	Otherwise
(a) Miscellaneous Minor Ailments ...	295	161
(b) Ultra Violet Light	119	—
Total	414	161

Hospital Schools.

Children requiring prolonged hospital treatment are now often admitted to special " long-stay " hospitals, many of which have educational facilities which are recognised by the Ministry of Education. They are known as Hospital Schools.

The number of children away at these schools, together with the details of admissions and discharges during the year, is as follows:—

Name of Hospital School	No. of children from this Division	Reason	Admitted during 1953	Discharged during 1953
Leasowe Children's Hospital School, Wallasey	1 (G.L.)	Physically Handicapped	—	—
Pinderfields Hospital School, Wakefield	1 (L.H.)	Physically Handicapped	January	—
Fielden Long-stay Hospital, Todmorden	3 (A.P.) (P.M.) (P.C.)	Physically Handicapped	— 1953 May	May March August
Heritage Craft School, Chailey	1 (C.P.)	Physically Handicapped	—	—
Biddulph Orthopaedic Hospital, Biddulph, Stoke-on-Trent	1 (E.S.)	Physically Handicapped	February	December
Adela Shaw Hospital, Kirbymoorside	1 (M.P.)	Physically Handicapped	December	—

Convalescent Home Treatment.

Arrangements are made for selected school children to be sent to Convalescent Homes at the expense of the Education Committee. The children selected are usually suffering from general debility and the need for convalescent treatment is approved by the School Medical Officer before financial responsibility is accepted. These do not include cases admitted to Convalescent Homes through the Hospital Service.

During the year 9 children were sent to the following convalescent homes:—

Craig Convalescent Home, Morecambe	...	...	...	...	3
Toxal Edge Convalescent Home, Whaley Bridge, Near Manchester					2
West Kirby Convalescent Home, near Liverpool	...	...	...		1
St. Joseph's Convalescent Home, Freshfield, near Liverpool	...				1
Prestatyn Convalescent Home, Prestatyn	...	...	...	...	1
Hillaway Children's Convalescent Home, Stoke-in-Teignhead	...				1

Infectious Diseases.

The following table shows the number of cases of infectious diseases occurring in school children.

SCHOOL	Measles	Whooping Cough	Scarlet Fever	Polio- myelitis	Dysentery	Erysipelas	Meningitis	Pneumonia
Clough Head County	3	—	4	—	—	—	—	—
Golcar C. of E.	33	2	13	—	—	—	—	—
Knowl Bank County	—	—	9	—	—	—	—	—
Knowl Bank County Infants	12	1	—	—	—	—	—	—
Linthwaite C. of E.	24	—	2	—	—	—	—	—
Linthwaite County	3	1	1	—	—	—	—	—
Linthwaite County Infants ...	31	—	4	—	—	—	1	—
Marsden County Infants ...	88	1	1	—	—	—	—	—
Marsden C. of E.	4	—	1	—	—	—	—	—
Marsden Secondary Modern	1	—	1	—	—	—	—	—
Nields County	3	1	—	—	—	—	—	—
Scammonden C. of E.	2	—	—	—	—	—	—	—
Scapegoat Hill County ...	8	—	—	—	—	—	—	—
Slaithwaite C. of E.	—	—	3	—	—	—	—	—
Slaithwaite C. of E. Infants	4	4	3	—	—	—	—	—
West Slaithwaite C. of E. ...	1	1	—	—	—	—	—	—
Wellhouse County	2	—	1	—	—	—	—	—
Birdsedge County	2	—	—	—	—	—	—	—
Clayton West County	1	1	4	—	—	—	—	1
Cumberworth C. of E.	4	—	1	—	—	—	—	—
Denby Dale County	2	10	3	—	—	—	—	—
Emley County	—	1	3	—	—	—	—	—
Scissett C. of E.	4	1	—	—	—	—	—	—
Scissett Secondary Modern ...	—	—	4	—	—	—	—	—
Skelmanthorpe County	3	—	5	—	—	—	—	—
Brockholes C. of E.	2	—	—	—	—	—	—	—
Hade 'Edge County	12	1	—	—	—	—	—	—
Hepworth County	8	—	—	—	—	—	—	—
Holmbridge C. of E.	2	—	—	—	—	—	—	1
Holme County	6	—	—	—	—	—	—	—
Holmfirth County	15	—	—	—	—	—	—	—
Holmfirth Secondary Modern	3	—	2	—	—	—	—	—
Honley C. of E.	1	1	1	—	—	—	—	—
Honley C. of E. Infants ...	66	—	—	—	—	—	1	—
Netherthong County	2	—	—	—	—	—	—	—
New Mill C. of E.	2	—	—	—	—	—	—	—
New Mill County Infants ...	1	—	—	—	—	—	—	—
Scholes County	27	1	1	—	—	—	—	—
Upperthong County	24	—	—	—	—	—	—	1
Wooddale County	11	—	—	—	—	—	—	—
Farnley Tyas C. of E.	—	3	—	—	—	—	—	—
Flockton C. of E.	2	—	1	—	—	—	—	—
Kirkburton C. of E.	1	—	1	—	—	—	1	1
Kirburton Secondary Mod.	2	—	—	—	—	—	—	—
Kirkheaton C. of E.	3	—	—	—	—	—	—	—
Lepton C. of E.	13	—	—	—	4	—	—	—
Lepton County	2	—	—	—	—	—	—	—
Shelley County	—	1	14	—	—	—	—	—
Shepley County	1	—	3	—	—	—	—	—
Helme C. of E.	1	—	—	—	—	—	—	2
Meltham C. of E.	3	—	1	—	—	—	—	—
Meltham C. of E. Infants ...	23	14	—	—	—	—	—	—
Meltham Mills C. of E. ...	1	—	—	—	—	—	—	1
Delph County Primary	9	—	5	—	—	—	—	—
Denshaw C. of E.	1	—	—	—	—	—	—	—
Diggle County	1	—	—	—	—	1	—	—
Dobcross C. of E.	5	—	1	—	—	—	—	—
Doctor Lane C. of E.	10	—	—	—	—	—	—	—
Friezland County	1	—	1	—	—	—	—	—
Greenfield County	26	3	3	—	—	—	—	—
Greenfield C. of E.	8	—	—	—	—	—	—	—
Lydgate C. of E.	1	—	—	—	—	—	—	—
Saddleworth Parochial ...	2	—	3	—	—	—	—	—
Springhead County	1	—	—	—	—	—	—	—
Springhead County Infants ...	6	—	2	—	1	—	—	—
Uppermill Secondary Modern	3	—	4	1	—	—	—	—
TOTAL	543	48	106	1	5	1	3	7

In addition the following cases of infectious diseases were notified by various head teachers:—

Impetigo	...	3	Chicken Pox	...	221
Conjunctivitis	...	6	Mumps	...	171
Jaundice	...	12	German Measles	...	331

Diphtheria Immunisation.

The previous arrangements for diphtheria immunisation have continued, the injections being given by private practitioners and at the Welfare Centres, and special immunisation sessions have been held at various schools.

The majority of children are now immunised before entering school. This should always be the case and the importance of immunisation in infancy cannot be over-emphasised. Children protected in infancy should have booster injections when they commence school and five years later.

The following figures indicate the number of children who received primary immunisation after entering school and also the number receiving reinforcement injections:—

				Primary Immunisation	Reinforcement Injections
Colne Valley	...	...	...	55	732
Denby Dale	...	...	...	—	21
Holmfirth	...	...	...	110	683
Kirkburton	...	...	...	126	322
Meltham	...	...	...	—	92
Saddleworth	...	...	...	13	56
				304	1906

Deaths in School Children

During the year 5 deaths were registered amongst school children (3 boys and 2 girls) aged 5 to 10 years. The following are brief details:—

Sex and Age	Area	Cause of Death
1. Girl aged 9.	Holmfirth	1 (a) Cardiac Heart Failure. (b) Mesenteric Thrombosis. (c) Appendicectomy.
2. Boy aged 5.	Holmfirth	Crush injuries on the left side of the face and skull sustained when trapped by the moving end of an electrically operated gate at Rock Mills, Brockholes.
3. Boy aged 10.	Meltham	Respiratory and Heart Failure resulting from Haemorrhage around the Brain Stem as a result of being accidentally struck by a golf club on the right lower jaw.
4. Girl aged 6.	Colne Valley	1(a) Tuberculous Meningitis. (b) Bilateral Basal Pneumonia.
5. Boy aged 10.	Saddleworth	1(a) Left Ventricular failure. (b) Hypertension. (c) Chronic Nephritis.

School Meals Service.

School meals are available at all schools in the Division. In some instances they are cooked in the individual school premises and in others are brought ready cooked from other school canteens. The meals are well cooked and varied. The number of pupils who take school meals varies much from school to school. In some almost 100% stay for the school dinner whilst at others less than half have the meal. Each school child is entitled to $\frac{1}{3}$ of a pint of milk daily free of charge. Here again many children, particularly the older ones, refuse to accept what is provided for their own benefit.

Excluding Saddleworth there were at the end of the year 231 children (2.4% of the school population) receiving meals at the expense of the Education Committee as compared with 152 (1.6%) in 1952. The number of children taking school meals was 5359 (55% of the school population) compared with 5579 (59%) in 1952. A total of 6717 (69.1%) were having school milk compared with 6296 (66.5%) in 1952.

At the end of the year out of 1,728 children on the school rolls in the Saddleworth Urban District 965 were taking school meals and 1,090 were having school milk.

In order to supplement the diet of infants Vitamin A and D. capsules are offered in schools to children of 7 years and under, and orange juice is offered to children under 5 years of age.

New entrants to the staffs of school canteens are examined by the Department's medical staff.

When a candidate is being interviewed her medical history is scrutinised and it is only when she is found to have a history of any of the following complaints that a full medical examination is carried out:—
Enteric, Typhoid, or Paratyphoid Fever.

Dysentery, Recurrent Diarrhoea, or any other ailment of the bowels.

Pulmonary Tuberculosis.

Recurrent boils or septic fingers.

Discharging ears.

Other septic infections.

Eczema, Dermatitis, or other skin diseases.

Persistent cough or spitting of blood.

Experience has shown that a comprehensive medical examination is not practicable and the inconvenience caused may have deterred suitable applicants. This abbreviated procedure is found to fulfil adequately all requirements.

During the year 77 new entrants were examined and in each case a certificate to the effect that the examinee was fit to work in the School Meals Service was forwarded to the Divisional Education Officer.

Youth Employment Service

There is close co-operation between the School Health and Youth Employment Services. The medical records of all school leavers are considered by the School Medical Officer before the pupils are inter-

viewed by the Youth Employment Officer and types of work for which any child is, in the the opinion of the Medical Officer, unsuited, are pointed out.

During the year recommendations were made that 48 children should not be employed in the following categories of work.

1. Heavy manual work	...	...	...	...	...	8
2. Work in dusty atmosphere	...	...	...	...	...	5
3. Normally acute vision	...	...	...	...	...	4
4. Normal colour vision	...	...	...	...	...	13
5. Normal hearing	...	...	...	...	...	2
6. Work near moving machinery or moving vehicles	...	...	...	...	...	15
7. Prolonged standing, much walking, or quick movement from place to place	...	...	...	...	...	1

The more seriously handicapped children are recommended to the Youth Employment Officer for inclusion in the Disabled Persons Register.

It is disappointing to report that in spite of the recommendations of the Youth Employment Officer and the School Medical Officer pupils frequently take up work in unsuitable occupations.

In connection with the Employment of Children Bye-Laws 69 children were examined as regards their suitability for employment outside school hours. Certificates were granted for employment as follows:—

Newspaper Delivery	...	...	...	...	63
Dancing and Entertainment	...	...	...	...	3
Shop Assistants	...	...	...	...	3

Handicapped Pupils.

Early ascertainment of Handicapped Pupils is one of the most important functions of the School Health Service.

A register is maintained of all pupils who owing to some mental or physical disability require special educational treatment.

During the year 84 pupils have been examined with reference to their need of special educational treatment, and recommendations for the provision of same were made in 77 cases. During the year 34 children were removed from the register as no longer requiring special educational treatment, or because they were over school age.

At the end of the year 261 pupils were included in the register, the sub-division into the various classes being as follows:—

Maladjusted	...	...	...	...	...	9
Deaf	...	...	...	...	...	6
Delicate	...	...	...	...	...	17
Speech	...	...	...	...	...	63
Partially Sighted	4
Blind	1
Physically Handicapped	17
Educationally Sub-normal	144

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The increased provision by the Education Committee of residential school accommodation for Handicapped Pupils has enabled an increasing number of children to receive the special educational treatment they require. The facilities available, however, are still inadequate, particularly for Educationally Sub-Normal pupils, 27 of whom are waiting for admission in special schools, and 91 for special treatment in ordinary schools at the end of the year. Several children are also awaiting placement from the Saddleworth area but it is hoped that it will be possible to arrange for suitable children to be admitted to the Special Day School for Educationally Sub-Normal pupils, which is provided by the Oldham Education Authority.

At the beginning of the year 33 children were in attendance at Special Schools and 18 children (4 educationally sub-normal, 9 delicate, 3 physically handicapped, 1 blind, 1 deaf) were admitted during the year. There were 15 discharges (9 delicate, 2 physically handicapped, 1 deaf, 2 educationally sub-normal, 1 blind) leaving a total of 36 children in attendance at Special Schools at the end of the year, the details being as follows:—

Category	No. away	Location of Special School
Blind	1	Yorkshire School for the Blind, York.
Partially Sighted	4	3 at School for Partially Sighted Children, Fulwood, Preston. 1 at Exhall Grange School, near Coventry.
Deaf	3	1 at Lawns House School, Leeds. 2 at Royal Residential School for the Deaf, Manchester.
Delicate	7	2 at Oak Bank Open-air School, Sevenoaks, Kent. 2 at Netherside Hall School, Grassington. 2 at Ingleborough Hall, Clapham. 1 at Bradstock Lockett, Southport.
Educationally Sub-Normal	13	4 at Royd Edge, Meltham. 4 at Baliol School, Sedburgh. 3 at Springfield Special School, Horsforth. 1 at Rossington Hall Special School, near Doncaster. 1 at Chancer Street Special School, Oldham.
Physically Handicapped	8	1 at Leasowe Children's Hospital School. 1 at Heritage Craft School, Chailey, Sussex. 1 at Hesley Hall School, Tickhill, near Doncaster. 1 at Derwen Cripples Training College, Oswestry. 1 at Welburn Hall School, Kirbymoorside. 1 at National Children's Home, Chipping Norton, Oxfordshire. 1 at Pinderfields Hospital School, Wakefield. 1 at White Ness Manor Special School, near Broadstairs.

At the end of the year 43 pupils in the following groups were awaiting placement in Special Schools or Hostels:—

Maladjusted	...	...	...	...	...	6
Delicate	...	...	...	...	...	5
Educationally Sub-normal	...	...	...	...	...	27
Physically Handicapped	...	...	...	...	...	5
						— 43

Home Tuition

Under Section 56 of the Education Act, 1944, education otherwise than at school may be provided for children who by reason of extraordinary circumstances are unable to attend a suitable school for the purpose of receiving primary or secondary education. This education is provided for the following classes of handicapped children.

- 1 Children in hospitals where there are not ordinarily enough children to warrant the establishment of a hospital special school.
- 2 Children who are educable but whose condition is such that it is inadvisable to send them to school.
- 3 Children awaiting a vacancy at a special school.

In order to advise whether home tuition is required such cases are examined by the School Medical Officer or the Educational Psychologist. At the end of the year 4 children were receiving home tuition.

Reports to the Local Health Authority: Education Act, 1944, Section 57.

During the year 6 children were reported to the Local Health Authority as "ineducable" (one being aged under 5) under Section 57(3). In addition 14 children were notified to the Local Health Authority under Section 57(5) as requiring care and supervision after leaving school.

Holiday Camps for Diabetic Children.

During the year the Education Authority accepted financial responsibility for providing 2 diabetic children with two weeks' holiday at the Bewerley Park Camp, Pateley Bridge. The arrangements were made by the Diabetic Association with the co-operation of the Almoner at the Huddersfield Royal Infirmary.

Medical Examination of Teachers and Entrants for Courses of Training.

Since April 1st, 1952, it has been the duty of the School Medical Officer of the area in which they reside to examine candidates applying for entry to training colleges, etc., for the purpose of satisfying the college authorities of their fitness to follow a course of teacher training.

During the year 44 candidates (5 males, 39 females) were examined and a report on Form 4 R.T.C. completed and forwarded to the appropriate college authority. In the majority of cases an X-ray examination of the chest was undertaken through the Miniature Mass Radiography Service.

Entrants to the Teaching Profession completing an approved course of training are examined by the college medical officer but in other cases the examination is now undertaken by the School Medical Officer of the employing authority.

During the year 13 reports on Form 28 R.Q. were forwarded to the Ministry of Education.

Liaison with Hospitals and General Practitioners.

It is pleasing to report that much more information is now being obtained from the hospital service regarding school children who receive treatment in hospital. Recommendations for special educational treatment for handicapped children are also made by the Hospital Consultants.

Under an agreement with the British Medical Association and the Society of Medical Officers of Health, children found at school suffering from defects requiring specialist advice or treatment are notified in the first instance to the family practitioner before an appointment at the Consultant's Clinic is arranged. By this arrangement the family practitioner is kept informed of defects found amongst his patients and copies of the Consultant's report are sent to him.

Sanitary Conditions of School Premises.

On the whole the schools in the Division are kept in a reasonable state of repair but owing to their age many of them are lacking in the provision of adequate washing facilities and satisfactory sanitary conveniences. It is intended that these deficiencies shall be remedied as early as practicable.

HEALTH VISITING

The Health Visiting staff has remained fairly constant throughout the year. At the commencement of the year a Superintendent Health Visitor, 10 Health Visitors (one part-time) and, two assistant Health Visitors were engaged in the Division. The assistants only carried out very occasional duties. Three Health Visitors commenced duties in July after completing their training in Leeds but one was transferred to another Division in August for personal reasons; another Health Visitor transferred to another Division following her marriage.

Urban District	Authorised Establishment	Staff at 31-12-53
Superintendent Health Visitor	1	1
Colne Valley	4	4
Denby Dale	2	1
Holmfirth	4	3
Kirkburton	3	3*
Meltham	1	1
Saddleworth	4	3
Assistant Health Visitors	—	2†
Tuberculosis Visitors	1	—
	20	18

* Includes 1 part-time.

† Part-time.

Although the establishment provides for one full-time tuberculosis visitor, this work is satisfactorily undertaken by the general health visitors. The number of home visits has shown a general increase over the previous year, the actual figure being much larger due to the inclusion of the Saddleworth Division.

Pre-school examinations of the 3 year old toddlers are most popular. A number of defects were found and placed under treatment.

It has not been possible to increase the number of teaching classes in schools but the health visitors have given occasional talks to the senior groups and one health visitor visits a Secondary Modern school regularly to teach mothercraft. In addition a number of lectures have been given to youth organisations, women's meetings, parent-teacher groups, etc.

Student health visitors from Leeds and Manchester have worked in the Division and all have expressed their appreciation of the intensive training they have received.

In recent years the work of the health visitor, or Public Health Nurse, has widened considerably and is more concerned now with the health and physical and mental well-being of the family as a whole, rather than concentrating on nursing and expectant mothers and children under five only. The health visitors are also the school nurses and it can readily be seen from the following summary of the visits paid during the year how wide her field is.

District	Expectant Mothers		Children under 1 year of age		Children Between Ages		Other Cases	Total Visits
	First Visits	Total Visits	First Visits	Total Visits	1—2	2—5	Total Visits	
Colne Valley	22	47	329	2850	1115	1805	868	7036
Denby Dale	23	27	129	946	362	579	445	2511
Holmfirth	6	59	290	2165	1040	1309	1166	6035
Kirkburton	41	118	175	1464	1138	1132	793	4861
Meltham	23	31	75	470	167	236	789	1791
Saddleworth	40	116	150	1788	1598	585	2250	6527
Division 20	155	398	1148	9683	5420	5646	6311	28761

Mention should also be made of the excellent contribution given by the health visitors during the busy period in April—May in connection with the smallpox outbreak, when their routine work was interrupted for several weeks to assist wherever required.

The visits shown in the above table include 6,950 of a non-routine nature, an analysis of which is as follows:—

Premature Babies	...	...	...	...	...	63
Stillbirths	...	...	...	...	...	10
Infant Deaths	...	...	...	...	...	17
Infectious Diseases	...	...	...	...	...	576

Care and After-Care —

Tuberculosis Patients	1075
Tuberculosis Contacts	806
Discharged from Hospital	69
Others	112
Post Natal	68
	— 2130
Home Help Service	1535
Aged	1387
Other Visits	683
Special Visits (not homes)	549
	— 6950

In addition 1,481 home visits were paid to school children for purposes of follow-up after routine inspections, hygiene, neglect, etc.

HOME NURSING

At the commencement of the year 11 home nurses, 2 nurse/midwives, 1 relief Home Nurse, and 2 relief nurse-midwives were engaged in the Division. During the year 3 home nurses resigned their appointments, and 3 midwives were re-appointed nurse-midwives.

With the amalgamation of the Saddleworth Urban District on the 1st October, 1953, 3 additional Home Nurses were taken on to the Divisional staff.

The establishment of home nurses approved by the Ministry of Health under the National Health Service Act and the staff position at the end of the year are as follows:—

Urban District	Authorised Establishment	Staff at 31st Dec., 1953	
		Home Nurses	Nurse-Midwives
Colne Valley	3	3	—
Denby Dale	2	1	2
Holmfirth	2	3	—
Kirkburton	3	1	2
Meltham	1	—	1
Saddleworth	3	3	—
Relief	1	1	2
Division 20	15	12	7

Particulars of the work done in the various districts by the home nurses and nurse-midwives are shown in the following table. The amount of work done by the home nurses still varies considerably and further readjustment of districts is required as soon as this can be arranged.

	Home Nursing			Midwifery	
	Transfers	New Patients	Visits Paid	Confinements	Visits Paid
COLNE VALLEY URBAN DISTRICT					
Golcar	28	221	3,224	—	—
Marsden and Slaithwaite	42	303	4,228	3	109
Linthwaite	44	211	3,820	—	—
	114	735	11,272	3	109
DENBY DALE URBAN DISTRICT					
Denby, Cumberworth and Clayton West	24	90	1,664	26	777
Emley, Skelmanthorpe and Scissett	32	260	5,112	29	969
	56	350	6,776	55	1,746
HOLMFIRTH URBAN DISTRICT					
Holmfirth	37	127	2,715	—	—
New Mill	23	78	2,594	—	—
Honley	21	120	2,038	—	—
	81	325	7,347	—	—
KIRKBURTON URBAN DISTRICT					
Kirkheaton, Lepton & Flockton	35	262	3,516	—	—
Kirkburton	13	120	2,545	12	430
Shelley and Shepley	19	69	2,645	15	464
	67	451	8,706	27	894
MELTHAM URBAN DISTRICT					
Meltham	25	100	2,625	30	879
SADDLEWORTH URBAN DISTRICT					
Delph, Dobcross, Denshaw	16	63	2,052	—	—
Springhead, Scouthead, Lydgate, Austerlands, Grotten	15	74	2,606	—	—
Greenfield, Diggle, Grasscroft, Uppermill	26	109	2,679	—	—
	57	246	7,337	—	—
Total for Division	400	2,207	44,063	115	3,628

Cases Treated.

As in previous years, the types and duration of cases treated during the year have been analysed. There is considerable variation between the different districts. In some, the nurse's time is largely devoted to attendance on the chronic sick, whilst in other districts many acute medical and post-operative surgical cases receive attention. Increased use is also being made of home nurses by general practitioners for the administration of drugs by injection, and particularly of penicillin and streptomycin.

At Emley it has been customary for some time past for the nurse to hold morning and evening dressing sessions at her home. This has continued and during the year patients suffering mainly from minor injuries have made 334 attendances.

Cases Discharged.

Of the 1766 cases the nurses ceased to attend during the year, 1,269 were discharged as recovered, 189 were transferred to hospital, and 308 died.

The tables given overleaf show the duration of treatment and the number of visits paid to patients in each group.

Patients under Treatment	Patients.		
	Recovered	Transferred	Died
Less than 1 week	459	65	101
1- 2 weeks	515	29	70
2- 4 weeks	113	25	33
4-13 weeks	116	30	51
3- 6 months	38	17	23
Over 6 months	28	23	30
TOTAL	1 269	189	308

Number of Visits Paid	To Patients Who		
	Recovered	Transferred	Died
3 or less	187	34	45
4- 7	469	42	63
8-15	448	32	64
16-30	88	32	62
31-50	50	17	29
51-75	16	19	16
76-100	7	3	8
Over 100	4	10	21
TOTAL	1,269	189	308

Types of Cases Attended.

The new cases attended and the total visits paid have, as last year, been analysed.

Type of Case	Transferred	New Cases	Visits Paid
Infectious	—	1	15
Pulmonary Tuberculosis	4	23	927
Non-Pulmonary Tuberculosis	3	5	230
Influenza	—	27	147
Pneumonia	4	72	934
Bronchitis	10	193	2535
Other Respiratory Diseases	4	27	614
Cancer of Uterus ..	1	4	206
Cancer of Stomach and Intestines	1	13	412
Cancer of Breast	2	14	969
Cancer of Other Sites	7	50	1,264
Diabetes	17	18	1,710
Cerebral Haemorrhage	21	114	3,693
Diseases of Heart and Circulation	39	182	4,429
Post-Operative Dressings	20	198	2,683
Injuries	19	96	1,330
Burns and Scalds	3	46	647
Septic Conditions (Boils, Abscesses Carbuncles)	14	291	3,763
Uterine Pro'lapse	73	32	878
Other Gynaecological Cases	—	11	127
Male Genito-urinary Conditions	3	10	568
Rheumatic and Arthritic Conditions	17	44	1,409
Ear and Eye Conditions	12	81	838
Varicose Ulcers	31	27	1,444
Impetigo ..	—	6	147
Other Skin Diseases	3	18	200
Chronic Diseases of Nervous System	8	18	1599
Mastitis	2	16	145
Acute Abdominal Conditions	1	18	119
Constipation	8	141	473
Thrombosis	6	42	722
Infantile Disorders	—	10	112
Circumcision	—	34	193
Senility	34	129	3,732
Other Conditions	33	226	4,843
TOTAL	400	2,207	44,063

It will be seen that Septic Conditions have again provided the largest number of new cases (291). Post-Operation Dressings (198) were the next most frequent, followed by Bronchitis (193), Diseases of the Heart and Circulatory System (182), Senility (129), and Cerebral Hæmorrhage (114).

New cases of Cancer, all sites, numbered 81, and those of Pneumonia 72.

Patients suffering from the following conditions received the largest number of visits:—

Diseases of Heart and Circulation	...	...	4,429	visits
Septic Conditions	...	...	3,769	„
Senility	...	...	3,732	„
Cerebral Hæmorrhage	...	...	3,693	„
Cancer (all sites)	...	...	2,851	„
Post-Operative Dressings	...	...	2,683	„
Bronchitis	...	...	2,535	„

Travelling Facilities for Home Nurses and Midwives.

No serious difficulties have been experienced during the year with regard to transport and only one midwife was dependent on public transport as a means of conveyance at the end of the year, when the position was as follows:—

	Using County Cars	Using Private Cars	Dependent on Public Transport
Home Nurses	8	4	—
Nurse/Midwives	2	5	—
Midwives	—	5	1
	10	14	1

No additional County cars were allotted for use in the Division but 3 of the older cars were replaced.

THE HOME HELP SERVICE

The Home Help Service is provided under the National Health Service Act 1946. Section 29 of the Act stipulates the class of case for which provision of a home help can be made. These are as follows:—

- | | |
|--------------------------|---|
| (a) Ill. | (e) Aged. |
| (b) Lying-in. | (f) A Child not over compulsory school age. |
| (c) An Expectant Mother. | |
| (d) Mentally Defective. | |

Before a home help can be provided a form of application must be signed by the head of the household. If there are any adults in the house other than the householder and wife, and they are likely to get some benefit from the services of the home help, they also are expected to sign an application form. A medical certificate stating the condition from which the patient is suffering and that a home help is required must be submitted with all applications under Class (a) Ill. Usually a home help can be provided only when the ill person is in the house. If the ill person is removed to hospital then a home help can be provided only if there is need for a home help under one of the other classes, e.g., children not over school age in the house.

In the case of the aged there is no need for the person to be ill in order to qualify for the provision of a home help. The extent of the need depends on the physical capacity of the aged person and the other persons in the household. A home help assisting an aged person can undertake domestic work or household management only and must not be used as a sitter-in. A home help cannot be provided merely because a householder offers to pay full cost; each case is treated strictly on its merits.

Briefly, a home help may be allocated to a household where there is sickness sufficient to require medical or nursing care; she cannot attend where a sick person is removed to hospital unless there is a child under school leaving age at home; she can attend to the domestic duties of the aged, mentally defective, and expectant of child, without stipulation as to sickness. The aged should generally be over 60 years of age, the mentally defective such as have been reported to the Health Committee, and those expectant of child would normally have some disability such as fatigue or varicose veins necessitating rest. She should as far as reasonably possible give her time to domestic duties or to family or household management (as appropriate to the case) and not undertake the duties of a "sitter-in."

Every applicant for a home help must sign an undertaking either to pay the full cost of the home help supplied or to give a statement of his income and capital and agree to pay the assessed charge according to the County Council scale. In assessing the charge the income of all persons assisted is taken into account. The actual assessment is carried out in the Divisional Welfare Office.

The authorised establishment of home helps for this Division is 27 and in terms of full-time home helps the number employed throughout the year has averaged 24.88.

Although an increasing number of home helps have been recruited there has been a marked increase in the demands on the service with the result that the time which could be devoted to any particular case has sometimes been less than was actually required. Every effort has been made, however, to allocate the services available where they were most urgently needed.

During the year 388 cases were provided with home helps as compared with 296 in the previous year. The duration of assistance provides was as follows:—

No. of cases provided with the services of a Home Help for:—					
Under 1 Month	1—3 Months	3—6 Months	6—9 Months	Over 9 Months	Total
101	70	44	48	125	388

Details of the assistance given to the 388 patients in the various categories is shown in the following table:—

Category	Colne Valley		Denby Dale		Holmfirth		Kirkburton		Meltham		Saddleworth		Total	
	No. of Pat-ients	Av. No. of hours per Patient	No. of Pat-ients	Av. No. of hours per Patient	No. of Pat-ients	Av. No. of hours per Patient	No. of Pat-ients	Av. No. of hours per Patient	No. of Pat-ients	Av. No. of hours per Patient	No. of Pat-ients	Av. No. of hours per Patient	No. of Pat-ients	Av. No. of hours per Patient
Maternity (in-cluding Expect-ant Mothers ...	23	76.91	11	73.36	11	63.64	8	82.25	6	72.67	18	62.94	77	71.47
Tuberculosis ...	1	20.00	—	—	2	365.50	—	—	—	—	—	—	3	250.33
Chronic Sick ... (including aged and infirm) ...	56	147.84	24	126.17	51	181.33	25	223.92	28	208.60	66	204.09	250	181.85
Others ...	9	97.44	2	41.50	12	132.92	10	72.20	4	53.50	21	82.05	58	89.89
Total ...	89	122.97	37	105.89	76	161.50	43	162.28	38	170.82	105	155.49	388	146.73

National Assistance Acts, 1948-1951.

No action was taken during the year under Section 47 of the National Assistance Act, 1948, whereby a local authority may take action to secure removal to suitable premises of persons in need of care and attention.

Ambulance Service.

During the year close co-operation has been maintained with the Superintendent of the Huddersfield Depot and any difficulties of a medical nature arising have been discussed.

The service has worked smoothly throughout the year and complaints have been negligible.

During the year the ambulances from the Huddersfield Depot made 3,922 journeys involving 114,698 miles, and carried 17,022 patients, 2,550 of these being stretcher patients. Included in the 17,022 patients carried were 14,053 hospital out-patients. Particulars of the cases carried are given below:—

Accident	...	...	...	...	...	269
Urgent	...	...	...	...	...	347
Mental	...	...	...	...	...	24
Maternity	...	...	...	...	...	144
Infectious	...	...	...	...	...	21
General	...	...	...	...	...	2 164
Out-Patients	...	...	...	...	...	14,053
						<hr/> 17,022 <hr/>

In addition to the ambulances stationed at the Huddersfield Depot, an ambulance, the property of the Holmfirth Urban District Council, operated as part of the County Service until November, when, owing to the difficulty of recruiting sufficient men to continue the service, the ambulance was handed over to the County Authorities. Since then all ambulance services in the Holmfirth District have been provided from the Huddersfield Depot.

In the Saddleworth area, the Oldham County Borough Ambulance Service, based at the Central Depot, Council Street, Oldham, provided full ambulance cover for the whole of the Urban District of Saddleworth. All statutory obligations placed on the West Riding County Council by virtue of the National Health Service Act so far as it concerns ambulance work, are carried out by this Service.

For mental cases, County Council ambulances are generally used and the authorised officer comes from Huddersfield with the ambulance he has arranged for the patient's transfer to hospital.

During the year, ambulances of the Oldham Service made 988 journeys involving 11,440 miles and carried 1,368 patients and in addition 1,143 journeys involving 20,944 miles were made by Sitting Case Cars on behalf of 2,390 patients. Of the patients carried 139 were classed as accident cases, 169 emergency cases and 3,450 others.

CHILDREN'S HOMES

Medical Arrangements.

The care and treatment of children accommodated in The Leas Children's Homes, Scholes, Holmfirth, during times of illness is delegated to a private practitioner with whom the children are registered under the National Health Service Act, 1946.

The Divisional Medical Officer has been made responsible for the preventive medical services of the local authority so far as the children are concerned. Each child is examined by a medical officer of the local authority on admission and at 6 monthly intervals. Advice is given regarding precautions to be taken against the spread of infectious diseases, hours of rest and sleep, and the general supervision of health, hygiene and dietary of the children.

Cases of difficulty in behaviour, boarding out, etc., are discussed with the Superintendent of the Homes and with the officers of the Children's Department. Visits are also made from time to time by the County Psychologist.

MENTAL HEALTH

The mental health work in the Division consists mainly of the supervision of defectives under voluntary and statutory supervision and under guardianship orders, and in the provision of reports about the home conditions of defectives, for the information of Hospital Management Committees, when applications for leave of absence or renewal of licence are under consideration. Training in handicrafts of various sorts is also given to suitable patients.

The work is done mainly by the Mental Health Social Worker and by the Home Teacher.

Very little has been done regarding the provision of personal histories and background information relating to patients admitted to and discharged from Mental Hospitals, as this work in the Division is largely done by the Social Worker attached to the local Mental Hospital.

There is great difficulty in securing institutional accommodation for those patients whose mental, physical, or social conditions make this desirable. As the Local Health Authority no longer provides residential accommodation all that can be done is to make recommendations to the Regional Hospital Board.

During the year 6 children were reported by the Local Education Authority under Section 57 (3) as ineducable and 14 under Section 57 (5) as requiring supervision after leaving school — all were placed under statutory supervision. Three adults were found "subject to be dealt with," 2 of these being admitted to institutions during the year.

At the end of the year the number of patients under supervision was as follows:—

	Male	Female	Total
Under Guardianship	—	1	1
Under Statutory Supervision	57	46	103
On Licence from Institutions	—	2	2
Under Voluntary Supervision and Observation	5	4	9

Of these patients 18 were in need of institutional care at the end of the year as follows:—

	Male	Female	Total
In urgent need	4	1	5
Not in urgent need	10	3	13
Total	14	4	18

The great need of defectives resident at home is facilities for occupational training either at occupation centres or in small groups or individually at home. The siting of occupation centres for the larger scattered Divisions such as No. 20 is very difficult. To serve the whole of this Division the centre would have to be in Huddersfield, but to gather together all the patients from the outlying areas would require the provision of special transport to an extent impracticable at the present time.

Through the kind co-operation of the Huddersfield and Oldham County Borough Authorities a few vacancies have been made available for West Riding patients and at the end of the year 4 patients were in attendance at the Scarleigh Occupation Centre, Milnsbridge and 2 at the Oldham Occupation Centre.

The training of smaller groups at the Centres at Linthwaite and Honley has continued under the supervision of Miss E. Ball, the Home Teacher, the number of patients who attended and the number of attendances being made as follows:—

Centre	No. of Sessions	No. of Patients	No. of Attendances	Average No. of Attendances per Session
Honley	5	2	5	1.00
Linthwaite ...	182	18	1111	6.10
Skelmanthorpe	89	11	535	6.01
Uppermill ...	44	4	103	2.34
Total	320	35	1754	5.48

The class at Honley was closed in February owing to lack of attendance.

The social activities during the year have included a combined Coronation party and display of handiwork and a Christmas party. Both were held at the Linthwaite centre and were well attended by patients and their parents from all parts of the Division. The Christmas party was followed by a visit to the pantomime.

Medical Examination for Superannuation Purposes.

New entrants to the County Service are required to undergo a medical examination to see if they are suitable for admission to the Superannuation Scheme, and these examinations have continued to be carried out by the Department's medical staff. During the year 72 such examinations (25 male, 47 female) were carried out.

In addition 2 male members of the County staff resident in this Division, who had been off duty through sickness for a considerable period, were examined to ascertain whether or not they were incapable of discharging with efficiency the duties of their employment by reason of permanent ill-health.

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